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Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

DLN: 93493089014161 OMB No. 1545-0047

Department of the Treasury

Internal Revenue Service For the 2019 calendar year, or tax year beginning 07-01-2019 , and ending 06-30-2020 C Name of organization D Employer identification number B Check if applicable: ROCKY MOŬNTAIN INSTITUTE ☐ Address change 74-2244146 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P.O. box if mail is not delivered to street address) Room/suite 2490 JUNCTION PLACE SUITE 200 ☐ Amended return ☐ Application pending (303) 245-1003 City or town, state or province, country, and ZIP or foreign postal code BOULDER, CO 80301 G Gross receipts \$ 61,864,266 Name and address of principal officer: H(a) Is this a group return for JULES KORTENHORST □Yes ☑No subordinates? 2490 JUNCTION PLACE SUITE 200 H(b) Are all subordinates BOULDER, CO 80301 ☐ Yes ☐No included? **☑** 501(c)(3) **☐** 501(c)() **◄** (insert no.) 4947(a)(1) or If "No," attach a list. (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW.RMI.ORG M State of legal domicile: CO L Year of formation: 1982 **K** Form of organization: lacktriangledown Corporation lacktriangledown Trust lacktriangledown Association lacktriangledown Other lacktriangledownSummary 1 Briefly describe the organization's mission or most significant activities: OUR MISSION IS TO TRANSFORM GLOBAL ENERGY USE TO CREATE A CLEAN, PROSPEROUS, AND SECURE LOW-CARBON FUTURE Activities & Governance 2 Check this box ► ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . 20 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 17 Total number of individuals employed in calendar year 2019 (Part V, line 2a) 5 261 **6** Total number of volunteers (estimate if necessary) 6 17 Total unrelated business revenue from Part VIII, column (C), line 12 **7**a 0 **b** Net unrelated business taxable income from Form 990-T, line 39 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . 44,756,600 51,847,182 Ravenue 9,921,955 9 Program service revenue (Part VIII, line 2g) . 8,711,812 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) -17,570 53,134 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 51,239 41,995 53,502,081 61,864,266 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 600,000 0 **14** Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 26,176,572 32,375,176 Expenses 75,000 16a Professional fundraising fees (Part IX, column (A), line 11e) . b Total fundraising expenses (Part IX, column (D), line 25) ▶2,439,437 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 18,693,443 19,644,557 44,945,015 52,619,733 18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) 9,244,533 Revenue less expenses. Subtract line 18 from line 12 . 8,557,066 Net Assets or Fund Balances Beginning of Current Year **End of Year** 47,374,815 59,543,794 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 12,131,611 15,357,565 22 Net assets or fund balances. Subtract line 21 from line 20 . 35,243,204 44,186,229 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Signature of officer Sign Here JULES KORTENHORST CEO Type or print name and title

Preparer's signature

For Paperwork Reduction Act Notice, see the separate instructions.

Firm's name ► PLANTE & MORAN PLLC

Firm's address ► 10 S RIVERSIDE PLAZA 9TH FLOOR

May the IRS discuss this return with the preparer shown above? (see instructions)

CHICAGO, IL 60606

Print/Type preparer's name

Paid

Preparer Use Only

Cat. No. 11282Y

2021-03-25

Check | if

self-employed

Firm's EIN ► 38-1357951

Phone no. (312) 207-1040

P01506476

Form 990 (2019)

☑ Yes ☐ No

Form	990 (2019)					Page 2
Pa	rt III Statement	of Program Service	e Accomplis	hments		
	Check if Sche	dule O contains a respo	onse or note to	any line in this Part III		🗹
1	Briefly describe the o	organization's mission:		·		
OUR	MISSION IS TO TRAN	SFORM GLOBAL ENERG	Y USE TO CREA	TE A CLEAN, PROSPEROUS, A	AND SECURE LOW-CARBON I	FUTURE.
2				vices during the year which v		
	the prior Form 990 o	or 990-EZ?				☐ Yes 🗹 No
	If "Yes," describe the	ese new services on Sch	nedule O.			
3	Did the organization	cease conducting, or m	nake significant	changes in how it conducts, a	any program	
	services?					🗌 Yes 🗹 No
	If "Yes," describe the	ese changes on Schedu	le O.			
4					st program services, as mea	
		nd 501(c)(4) organization			nts and allocations to others,	the total
		,, ,	J	F		
4a	(Code:) (Expenses \$	6,588,663	including grants of \$) (Revenue \$	1,349,472)
	See Additional Data					
4b	(Code:) (Expenses \$	6,031,563	including grants of \$) (Revenue \$	1,865,444)
	See Additional Data					
4c	(Code:) (Expenses \$	5,958,098	including grants of \$) (Revenue \$	1,914,270)
	See Additional Data		, ,	33 ,	, ,	
	See Additional Data	Table				
4d	Other program servi	ces (Describe in Sched	ule O.)			
	(Expenses \$	•	uding grants of	\$ 600,000)	(Revenue \$ 4,7	793,494)
4e	Total program serv	vice expenses ►	43,813,0	99	<u> </u>	<u> </u>
		•	•			Form 990 (2019)

Pai	tiV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 🛂	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 💆	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III $\ref{20}$.	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D</i> ,Part 2	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D,</i> Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🥞	11b		No
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 2	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	110
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E			NI.
1/1~	Did the organization maintain an office, employees, or agents outside of the United States?	13 14a	Yes	No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	162	
	business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Yes	
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

20b

21

Yes

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Par	Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L,</i> Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes,"</i> complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🔧	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	Yes	
Pai	Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
4 -	Enter the number reported in Pay 2 of Form 1006. Fatar 0, if ask soulistics		Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 146 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Yes	

Par	Statements Regarding Other IRS Filings and Tax Compliance (continued)							
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	261						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		2b	Yes				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		No			
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	.	3b					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority		4a	Yes				
b	financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country: CO, CH							
5a	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		No			
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		No			
С	c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?							
6a	6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?							
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or g not tax deductible?		6b					
	Organizations that may receive deductible contributions under section 170(c).							
а	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?							
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	· –	7b					
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was requir Form 8282?		7c		No			
d	If "Yes," indicate the number of Forms 8282 filed during the year							
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		No			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .		7f		No			
g	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?							
h	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?							
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by th sponsoring organization have excess business holdings at any time during the year?		8					
9	Sponsoring organizations maintaining donor advised funds.	Γ						
	,	⊢	9a					
	, , , , , , , , , , , , , , , , , , , ,	_	9b					
10	Section 501(c)(7) organizations. Enter:							
a b	Initiation fees and capital contributions included on Part VIII, line 12							
11	Section 501(c)(12) organizations. Enter:							
а								
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)							
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 104	11? :	12a					
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
	Is the organization licensed to issue qualified health plans in more than one state?	:	13a					
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans							
	250		این		N1 -			
	Did the organization receive any payments for indoor tanning services during the tax year?	_	14a 14b		No_			
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration of	<u> </u>	140					
		15 16		No No				
16	6 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? . If "Yes," complete Form 4720, Schedule O.							

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Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "N 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI	•	onse to l	ines 🔽
Se	ction A. Governing Body and Management			
1.5	Enter the number of voting members of the governing body at the end of the tax year 1a 20		Yes	No
Id	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4	Yes	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	9		No.
Sa	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			No
30	ction b. Policies (This Section b requests information about policies not required by the internal Nevent		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	461		
C -		16b		
<u>5e</u> 17	ction C. Disclosure List the states with which a copy of this Form 990 is required to be filed▶			
	AL , AK , AR , CA , CO , CT , FL , GA , HI , , MA , MI , MN , MS , NV , NH , NJ , NM , M , OR , PA , RI , SC , TN , UT , VA , WA , W	NY, NC	, KY , M , ND , C	ME , MD OH , OK
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
19	Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records: ►HEATHER MCCREERY 2490 JUNCTION PLACE SUITE 200 BOULDER, CO 80301 (303) 245-1003			

 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid. Isist all of the organization's current key employees, if any. See instructions for definition of "key employee." List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organizations. List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 freportable compensation from the organization and any related organizations. List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$100,000 of reportable compensation from the organizations. Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. (A) Name and title (B) Average hours per week (list any hours below dotted line) (B) Average hours per week (list any hours per week (list any hours below dotted line) (B) Average hours per week (list any hours per week (list any hours below dotted line) (C) Average hours per week (list any hours per week list any hours per week lis	Form 990 (2019)											Pag	ge 7
As Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax rear. ■ List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0 - in columns (D), (E), and (F) if no compensation was paid. ■ List all of the organization's current key employees, if any. See instructions for definition of "key employee." ■ List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organizations. ■ List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 freportable compensation from the organization and any related organizations for the order in which to list the persons above. ■ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. ■ (B) Name and title ■ (C) Position (do not check more than subject or the organization or any related organization or trustee) and the organization or			Truste	es, I	Key	En	nploy	ees	, Highest Comp	ensated Employ	yees,		
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Total (add lines 1b and 1c)														
of reportable compensation from the organization ▶ 73 3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual							▶		6,	648,394		0		631,564
Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such Individual				e liste	ed a	bov	e) who	rece	eived mo	ore than \$1	100,000			
line 1a? If "Yes," complete Schedule J for such individual													Yes	No
organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	,	,		,	•		, ,		_		d employee on	3		No
Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) Name and business address NTEGRATED SOLAR OPERATIONS OBOX 9731 SAN JUAN, PR 00908 SROSS GROUP LLC TIT SERVICES 745,956 100 UNION BLVD SUITE 200 AREWOOD, CO 80228 RILLIUM SOLUTIONS INC SION EMALLORY AVE SOUTH AND EMALLORY SETATE 845 WA SEMONKONG SET OF MICHAEL COUNTRY ESTATE 84	organization and related organization	the sum of repos s greater than \$	ortable (150,00	comp 0? <i>If</i> •	ensa "Yes	atior s," c	n and o omple	ther te Sc	compen chedule J	sation from	m the	4	Yes	
Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A)	, ·		•			,			_		lividual for	5		No
from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) Name and business address OBOX 9731 SIAN JUAN, PR. 00908 OROSS GROUP LLC OBOX 11T SERVICES OBOX 9731 SIAN JUAN, PR. 00908 OBOX 9731 SIAN JUAN, PR. 00908 S	Section B. Independent Contract	ors											<u>'</u>	
Name and business address Name and business address Compensation CONSTRUCTION AND ENGINEERING OF MICROGRI 1,281,458 OF MICROGRI CONSTRUCTION AND ENGINEERING OF MICROGRI 1,281,458 OF MICROGRI CONSTRUCTION AND ENGINEERING OF MICROGRI CONSULTION ENGINEERING CONSULTING CONSULTING CONSULTING CONTRACTOR CONTRACTO		nsation for the c									n's tax year.	mpens		
OF MICROGRI OF BOX 9731 SAN JUAN, PR 00908 BROSS GROUP LLC IT SERVICES 745,956 100 UNION BLVD SUITE 200 AKEWOOD, CO 80228 RILLIUM SOLUTIONS INC 1016 NE MALLORY AVE FORTLAND, OR 97211 ZULUMOYA CONSULTING (PTY) LTD 245 WATERFALL COUNTRY ESTATE 845 WA SEMONKONG SEMONKON			ess								cription of services		Compe	nsation
RICOS GROUP LLC RICO UNION BLVD SUITE 200 AKEWOOD, CO. 80228 RILLIUM SOLUTIONS INC RILLIUM SOLUTIONS INC RILLIUM SOLUTIONS INC RILLIUM SOLUTIONS INC ROBBILITY DATA CONSULTING 352,301 CONTRACTOR 275,812 RILLIUM SOLUTIONS INC CONTRACTOR 275,812 RILLIUM SOLUTIONS INC ROBBILITY DATA CONSULTING 352,301 CONTRACTOR 275,812 RICOMONION STATE 845 WA RICOMONION	INTEGRATED SOLAR OPERATIONS PO BOX 9731											RING	1	.,281,458
200 UNION BLVD SUITE 200 200 UNION BLVD SUITE 200 201 MOBILITY DATA CONSULTING 352,301 352,3	SAN JUAN, PR 00908 BROSS GROUP LLC									IT SERVICE				745,956
AKEWOOD, CO 80228 RILLIUM SOLUTIONS INC MOBILITY DATA CONSULTING 352,301 350,60 NE MALLORY AVE CORTLAND, OR 97211 ZULUMOYA CONSULTING (PTY) LTD CONTRACTOR 275,812 345 WATERFALL COUNTRY ESTATE 845 WA SEMONKONG SF MOYE WHITE LEGAL SERVICES 251,028 400 16TH ST 6TH FL DENVER, CO 80202 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of										li oziwie	-0			, 13,500
S106 NE MALLORY AVE PORTLAND, OR 97211 ZULUMOYA CONSULTING (PTY) LTD S45 WATERFALL COUNTRY ESTATE 845 WA SEMONKONG SF MOYE WHITE LEGAL SERVICES 251,028 251,028 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of	LAKEWOOD, CO 80228									MODILITY	DATA CONCULTING			252 201
PORTLAND, OR 97211 ZULUMOYA CONSULTING (PTY) LTD S45 WATERFALL COUNTRY ESTATE 845 WA SEMONKONG SF MOYE WHITE LEGAL SERVICES 251,028 LA00 16TH ST 6TH FL DENVER, CO 80202 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of										MORILITA	DATA CONSULTING			352,301
A45 WATERFALL COUNTRY ESTATE 845 WA SEMONKONG SF MOYE WHITE LEGAL SERVICES 251,028 LEGAL SERVICES 251,028 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of	PORTLAND, OR 97211													
SEMONKONG SET MOYE WHITE LEGAL SERVICES 251,028 LEGAL SERVICES 251,028 251,028 251,028 251,028										CONTRACT	OR			275,812
AOYE WHITE LEGAL SERVICES 251,028 1,400 16TH ST 6TH FL DENVER, CO 80202 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of	SEMONKONG													
DENVER, CO 80202 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of	MOYE WHITE									LEGAL SER	VICES			251,028
	1400 16TH ST 6TH FL DENVER, CO 80202													
			not lim	ited t	o th	ose	listed	abo	/e) who	received m	nore than \$100,0	00 of		

		(2019)	of Doverno						Page 9
Part	VIII			a respo	onse or note to anv	line in this Part VIII			🗆
		3.1331(1) 23.133		<u> </u>		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
,, s	1:	a Federated campa	aigns	1a			revenue		312 314
ons, Gifts, Grants Similar Amounts		b Membership dues	s	1 b					
, G		c Fundraising even		1c					
ifts ar A		d Related organizat		1d	100,000				
s, G imil		e Government grants		1e	84,382				
Contributions, Gifts, Grants and Other Similar Amounts		 f All other contribution and similar amounts above q Noncash contribution 	s not included	1f	51,662,800				
		lines 1a - 1f:\$	nis iliciuded ili	1 g	1,326,466				
Conta		h Total. Add lines :	1a-1f		•	51,847,182			
					Business Code				
•	2a	CONSULTING FEES			541610	7,537,269	7,537,269		
Program Service Revenue	ь	GOVERNMENT AND M	1ULTILATERAL CC	NSU	541610	1,440,269	1,440,269		
ce R	c	PROGRAM EVENT REV	VENUE		541900	373,417	373,417		
Servi	d	PROGRAM MEMBERSH	HIP FEES		541900	346,208	346,208		
ogram	e	CARBON OFFSETS			900099	223,445	223,445		
Δ	f	All other program	service revenu	e.		1,347	1,347		
		Total. Add lines 2			9,921,955				
	3	Investment income similar amounts) .	(including divi		nterest, and other	52,71	6		52,716
	ı	Income from invest							
	5	Royalties			1	2,03	0		2,030
			(i) R	eaı	(ii) Personal	-			
		Gross rents	6a	39,240)				
	b	Less: rental expenses	6Ь	C)				
	С	Rental income or (loss)	6c	39,240					
	٠	Net rental income	e or (loss)		I	39,24	0		39,240
			(i) Secu	ırities	(ii) Other				
	7a	Gross amount from sales of assets other than inventory	7a	418	3				
	b	Less: cost or other basis and sales expenses	7b	C)				
	С	Gain or (loss)	7c	418	3				
		l Net gain or (loss)				41	8		418
Other Revenue	8 a	of Gross income from fu (not including \$	d on line 1c).						
Rev	,	Less: direct expen		8a 8b		-			
er	ı	Net income or (los			ents 🕨	_			
	9a	Gross income from see Part IV, line 19							
	l E	Less: direct expen		9a 9b		-			
	l	Net income or (los			ies	_			
	10	aGross sales of inve							
		returns and allowa Less: cost of good:		10a 10b					
		Net income or (los			orv ▶	_			
		Miscellaneo	us Revenue		Business Code				
	11	larelated rental	-		53112	72	72!	5	
	Ŀ								
		All co							
		d All other revenue • Total. Add lines 1:							
		2 Total revenue, Se				72	5		
		- rotal revenue, 50	ee mou ucuons	• •	· · · •	61,864,26	9,922,680		0 94,404 Form 990 (2019)

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Part IX Statement of Functional Expenses				
Section $501(c)(3)$ and $501(c)(4)$ organizations must c				· · · · —
Check if Schedule O contains a response or note to an	y line in this Part IX			🗹
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	300,000	300,000		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	300,000	300,000		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	6,144,369	4,203,250	1,649,858	291,261
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	21,086,393	17,698,784	2,124,745	1,262,864
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	842,355	721,455	78,986	41,914
9 Other employee benefits	2,721,651	2,263,193	308,792	149,666
10 Payroll taxes	1,580,408	1,293,613	202,080	84,715
11 Fees for services (non-employees):				
a Management				
b Legal	493,512	322,014	163,317	8,181
c Accounting	178,282	44,048	134,234	
d Lobbying	·	ŕ		
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	5,110		5,110	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	10,248,331	9,887,781	295,101	65,449
12 Advertising and promotion	387,535	294,914	87,221	5,400
13 Office expenses	1,332,398	842,356	307,006	183,036
14 Information technology	1,497,230	1,273,535	131,691	92,004
15 Royalties	, ,	, ,		
16 Occupancy	1,650,470	1,458,417	112,884	79,169
17 Travel	1,865,034	1,487,852	271,883	105,299
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	1,003,034	1,407,032	271,003	
19 Conferences, conventions, and meetings	605,541	537,101	47,764	20,676
20 Interest	303,423	337,232	303,423	
21 Payments to affiliates	303,123		333/123	
22 Depreciation, depletion, and amortization	828,333	676,767	112,461	39,105
23 Insurance	176,436	150,483	15,255	10,698
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)	170,430	130,103	13,233	10,030
a FOREIGN CURRENCY ADJUST	62,451	57,536	4,915	
b PROPERTY TAXES	10,471		10,471	
С				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	52,619,733	43,813,099	6,367,197	2,439,437
Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				
Check here ► ☐ if following SOP 98-2 (ASC 958-720).				

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ō 29

Assets 30 Net assets with donor restrictions .

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

complete lines 29 through 33.

Total net assets or fund balances

Organizations that do not follow FASB ASC 958, check here > \(\begin{align*} \text{and} \\ \text{and} \end{align*}

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Page **11**

Check if Schedule	O contains a	response o	or note to	any line	e in this	Part IX	
							_

	Beginning of year		End of year
Cash-non-interest-bearing	9,595,372	1	25,946,455
Savings and temporary cash investments		2	
Pledges and grants resolvable, not	13 372 784	2	9 945 698

2 Pledges and grants receivable, net . 4.987.659 Accounts receivable, net Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled 5

9,945,698 3 2,621,620 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B). 6 7 Notes and loans receivable, net Assets 8 Inventories for sale or use . . Prepaid expenses and deferred charges . 821,396 9 10a Land, buildings, and equipment: cost or other

737,725 10a 19.217,732 basis. Complete Part VI of Schedule D 10b 3,691,945 15,937,565 10c 15,525,787 b Less: accumulated depreciation 11 Investments—publicly traded securities . 11 548.401 547,102 12 Investments—other securities. See Part IV, line 11 . 12 720,220 13 720,220 13 Investments—program-related. See Part IV, line 11 0 1,828,583 14 14 Intangible assets . 1,391,418 15 1,670,604 15 Other assets. See Part IV, line 11 . . . 47,374,815 16 59,543,794 16 **Total assets.** Add lines 1 through 15 (must equal line 34) . 17 Accounts payable and accrued expenses 4,928,544 17 4,971,435

18 18 Grants payable . 19 782.672 19 544.761 Deferred revenue . . . 20 Tax-exempt bond liabilities . . 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D Liabilities 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity 22 5,969,068 9,604,632 23 Secured mortgages and notes payable to unrelated third parties 23 24 24 Unsecured notes and loans payable to unrelated third parties . 451,327 236,737 25 25 Other liabilities (including federal income tax, payables to related third parties,

and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D 12.131.611 15.357.565 26 Total liabilities. Add lines 17 through 25 . . 26

Fund Balances Organizations that follow FASB ASC 958, check here <a> \square and complete lines 27, 28, 32, and 33. 27 12,314,363 27 17,767,122 Net assets without donor restrictions

22,928,841

35,243,204

47,374,815

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29

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26,419,107

44,186,229

59,543,794

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3h

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audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Additional Data

Software ID:

Software Version: FIN: 74-2244146

Name: ROCKY MOUNTAIN INSTITUTE

Form 990 (2019)

RESILIENT AND AFFORDABLE ENERGY FUTURE POWERED BY EFFICIENCY AND RENEWABLES.

Form 990, Part III, Line 4a:

EMPOWERING CLEAN ECONOMIES - SUPPORTING LOW AND MIDDLE-INCOME COUNTRIES CAN HELP MEET AMBITIOUS CLIMATE TARGETS ESTABLISHED AS PART OF THE PARIS AGREEMENT, WHILE ALSO PROVIDING RELIABLE, AFFORDABLE ENERGY ACCESS TO PEOPLE WHOSE HEALTH AND LIVELIHOODS DEPEND ON IT, BY EMBRACING AND MAXIMIZING THE CONTRIBUTIONS OF CLEAN ENERGY SOLUTIONS IN THEIR NATIONAL SETTINGS. SUPPORTING INITIATIVES INCLUDE: 1) SUSTAINABLE ENERGY FOR ECONOMIC DEVELOPMENT - SPEEDING UP ACCESS TO CLEAN ELECTRICITY IN SUB-SAHARAN AFRICA AS A MEANS TO IMPROVE QUALITY OF LIFE AND UNDERPIN ECONOMIC DEVELOPMENT.2) ISLANDS ENERGY PROGRAM - ADVANCING THE TRANSITION OF ISLAND ECONOMIES FROM FOSSIL FUEL DEPENDENCE TO A MORE

Form 990, Part III, Line 4b: ELECTRICITY CREATING A CLEAN, RESILIENT, AND AFFORDABLE ELECTRICITY SYSTEM THAT PRODUCES LESS POLLUTION AND CLIMATE-ALTERING CO2. SUPPORTING INITIATIVES INCLUDE: 1) REGULATORY AND BUSINESS MODEL REFORM WORKING WITH UTILITIES AND STATE REGULATORY COMMISSIONS TO EVOLVE BUSINESS AND REGULATORY MODELS AND ADVANCE MORE MODERN ELECTRICITY RATE STRUCTURES. WE AIM TO SUPPORT THREE TO FIVE STATES THAT ARE COMMITTED TO

REGULATORY AND BUSINESS MODEL REFORM THAT WILL DRIVE A RENEWABLY POWERED ELECTRICITY SYSTEM BY 2020.2) ELECTRICITY INNOVATION LAB (E-LAB)
CONVENING INDUSTRY PLAYERS TO IDENTIFY PROMISING REFORM APPROACHES AND STRATEGIZE ON HOW TO SCALE THEM EFFECTIVELY TO TRANSFORM THE
ELECTRICITY SYSTEM FROM THE INSIDE OUT.

INDUSTRY - WE ARE WORKING ON A CRITICAL PIECE OF THE CLIMATE PUZZLE: DECARBONIZING THE WORLD'S GOODS AND SERVICES, INCLUDING HOW THEY ARE DESIGNED, SOURCED, PRODUCED, AND DELIVERED. OUR PLANET IS DROWNING IN EMISSIONS FROM THE PRODUCTION OF GOODS AND THE SERVICES WE USE TO TRANSPORT THEM, AND IT'S CRITICAL WE ADDRESS THIS CRUCIAL SECTOR, OUR WORK INCLUDES: 1. MATERIAL VALUE CHAINS - DECARBONIZING THE MATERIALS THAT

GO INTO OUR EVERYDAY GOODS, INCLUDING METALS AND MINERALS, STEEL, AND CEMENT. 2. ENERGY INPUTS - REDUCING THE CARBON INTENSITY OF THE FUELS USED TO PRODUCE AND TRANSPORT GOODS.3. HEAVY TRANSPORT - WORKING TO DECARBONIZE THE TRUCKS, TRAINS, AIRPLANES, AND SHIPS THAT MOVE PEOPLE AND

GOODS AROUND THE WORLD EVERY DAY 4. COMET - AN ALLIANCE TO CREATE A UNIVERSAL GREENHOUSE GAS (GHG) CALCULATION FRAMEWORK FOR THE MINERAL AND

INDUSTRIAL SUPPLY CHAINS. POWERED BY MIT'S SUSTAINABLE SUPPLY CHAINS INITIATIVE. THE COLUMBIA CENTER FOR SUSTAINABLE INVESTMENT, RMI, AND THE COLORADO SCHOOL OF MINES.5. CLIMATE ACTION ENGINE - AN EMISSIONS DATA PLATFORM THAT WEAVES TOGETHER METHANE EMISSIONS DATA WITH OTHER OIL

AND GAS INFORMATION, SUCH AS LOCATION, OWNERSHIP, AND FINANCIAL PERFORMANCE DATA UNDER A SINGLE DATA AND ANALYTICS PLATFORM.

Form 990, Part III, Line 4c:

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code:

others, the total expenses, and revenue, if any, for each program service reported. (Code:) (Expenses \$ 5,401,431 including grants of \$ 600,000) (Revenue \$ 2,841,533) BUILDINGS: CATALYZING MASSIVE MARKET GROWTH FOR BUILDINGS THAT ARE MORE PRODUCTIVE, VALUABLE, HEALTHY, AND SAFE FOR THE PEOPLE WHO OCCUPY THEM, SOCIETY AND THE PLANET, SUPPORTING INITIATIVES INCLUDE: 1) PORTFOLIO ENERGY OPTIMIZATION -DEVELOPING AND SCALING AN INNOVATIVE AND COST-EFFECTIVE RETROFIT APPROACH TO REDUCE ENERGY USE IN COMMERCIAL

BUILDINGS.2) PATHWAYS TO ZERO - DRIVING THE ADOPTION OF SUPEREFFICIENT AND NET-ZERO ENERGY BUILDINGS IN NEW AND EXISTING HEALTHIER HOMES FOR OUR FAMILIES, OUR POCKETBOOKS, AND THE ENVIRONMENT. 4) REALIZE - PROPELLING THE ZERO CARBON RESIDENTIAL REVOLUTION FORWARD, BY MAKING BETTER PERFORMING. SAFER, AND MORE COMFORTABLE HOMES FOR ALL AMERICAN

BUILDING PORTFOLIOS AND AT THE DISTRICT LEVEL, WITH THE GOAL OF SAVING 50 MILLION TONS OF CARBON OVER FIVE YEARS.3) RESIDENTIAL ENERGY+ - STIMULATING U.S. HOMEOWNER INVESTMENTS IN ENERGY EFFICIENCY AND RENEWABLE ENERGY TO CREATE

Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.

FAMILIES, THAT ALSO SPUR WEALTH AND JOB CREATION IN COMMUNITIES ACROSS THE COUNTRY, ESPECIALLY THOSE THAT HAVE BEEN

ECONOMICALLY LEFT BEHIND.5) THE GLOBAL COOLING PRIZE - AN INNOVATION COMPETITION TO DEVELOP A CLIMATE-FRIENDLY RESIDENTIAL

) (Revenue \$

COOLING SOLUTION THAT CAN PROVIDE ACCESS TO COOLING TO PEOPLE AROUND THE WORLD WITHOUT WARMING THE PLANET.

) (Expenses \$ 2,898,029 including grants of \$

BUILDING ELECTRIFICATION: DEVELOPING INTEGRATED SOLUTIONS TO SWIFTLY ELIMINATE FOSSIL FUELS FROM BUILDINGS

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

POSSIBLE AND ECONOMIC AT THE CITY LEVEL.

others, the total expenses, and revenue, if any, for each program service reported.

Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to

(Code:) (Expenses \$ 2,305,679 including grants of \$) (Revenue \$ CITIES AND STATES: DEVELOPING STRATEGIC, COST-EFFECTIVE SOLUTIONS AND THE TECHNICAL ASSISTANCE TO HELP CITIES AND STATES

REALIZE THEIR AMBITIOUS CLIMATE GOALS AND TO CREATE A CREDIBLE, ECONOMICALLY VIABLE PATH TO FULL CLIMATE-NEUTRALITY.

SUPPORTING INITIATIVES INCLUDE: 1) AMERICAS PLEDGE - ANALYZE, CATALYZE, AND SHOWCASE HOW CLIMATE ACTION LED BY STATES,

CITIES, AND BUSINESSES IS DRIVING THE UNITED STATES TOGETHER TOWARD A LOW-CARBON FUTURE. 2) CITIES RENEWABLES ACCELERATOR - ACCELERATING OPPORTUNITIES FOR WINNERS OF THE AMERICAN CITIES CLIMATE CHALLENGE, AN INITIATIVE SPONSORED BY

BLOOMBERG PHILANTHROPIES, URBAN SUSTAINABILITY DIRECTORS NETWORK MEMBERS, AND OTHER U.S. CITIES, TO IMPLEMENT HIGH-

(Code:) (Expenses \$ 3,352,990 including grants of \$) (Revenue \$ 408,220)

IMPACT, NEAR-TERM RENEWABLE ENERGY PROJECTS.

CHINA - HELPING CHINA TO SLASH CARBON EMISSIONS AND CHART A CLEAN ENERGY PATHWAY SO THE WORLD'S LARGEST ECONOMY AND

CARBON EMITTER CAN ACHIEVE GREATER HEALTH AND VITALITY AND HELP CURB GLOBAL CLIMATE CHANGE. SUPPORTING INITIATIVES

INCLUDE: 1) REFORMING CHINA'S POWER MARKET: TO INTEGRATE MORE RENEWABLES OVER COAL. 2) ELECTRIFYING TRANSPORTATION: TO

SHIFT FREIGHT OFF OIL AND ONTO ELECTRICITY. 3) ESTABLISHING NEAR-ZERO CARBON ZONES: TO SUPPORT CONTINUED URBANIZATION

WITHOUT INCREASING EMISSIONS.4) SUPPORTING CITIES IN PEAKING CARBON EMISSIONS: TO PROVE REDUCING CARBON EMISSIONS IS

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

PATH TOWARD TRANSITIONING THE POWER SECTOR ONTO A 1.5C PATHWAY.

Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

(Code:) (Expenses \$ 2,184,128 including grants of \$) (Revenue \$ 122,288)

EMERGING SOLUTIONS - IDENTIFYING AND SCALING NEW PATHWAYS TO SPEED THE GLOBAL ENERGY TRANSITION. SUPPORTING INITIATIVES

INCLUDE: 1) SEVEN CHALLENGES TO GLOBAL ENERGY TRANSITION - RESEARCH THAT HIGHLIGHTS THE OPPORTUNITIES FOR COORDINATED

ACTION ACROSS PUBLIC, PRIVATE, AND COMMUNITY ACTORS TO RAPIDLY DECARBONIZE THE GLOBAL ECONOMY.2) EMERGING INNOVATION

SUMMIT - CONVENING KEY US AND GLOBAL INFLUENCERS TO SOLVE BIG, INTEGRATED ENERGY CHALLENGES AND SET PRIORITIES ON AREAS

OF FOCUS.3) THE GLOBAL ENERGY SOLUTIONS LAB - A COLLABORATIVE PLATFORM FOR PRIVATE. PUBLIC, AND PHILANTHROPIC ORGANIZATIONS TO APPLY WHOLE-SYSTEMS DESIGN AND ANALYSIS TO GENERATE AND TEST NEW INITIATIVES.

(Code:) (Expenses \$ 2,107,531 including grants of \$) (Revenue \$ 231,584)

POLICY-MAKERS TO SUPPORT A LOW-CARBON FUTURE. SUPPORTING INITIATIVES INCLUDE: 1) REINVENTING CLIMATE FINANCE - PROVIDING A

GLOBAL CLIMATE FINANCE - ALIGNING GLOBAL INVESTMENT WITH CLEAN ENERGY GOALS, AND ENGAGING FINANCIAL INSTITUTIONS AND

HOLISTIC VIEW OF CLIMATE FINANCE TO DRIVE DECARBONIZATION.2) GREEN INVESTMENT BANKS - INCREASING THE AVAILABILITY OF AND

EASE OF ACCESS TO FINANCE FOR LOW-CARBON DEVELOPMENT IN EMERGING COUNTRIES.3) CLIMATE FINANCE ACCESS NETWORK -

IMPROVING THE CAPACITY OF LOW-INCOME COUNTRIES TO UNLOCK FUNDING FOR GREEN INVESTMENT.4) MANAGING THE COAL CAPITAL

TRANSITION - EASING CAPITAL DESTRUCTION FOR ASSET OWNERS AND THEIR SHAREHOLDERS WHILE OFFERING POLICYMAKERS A CLEARER

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

BEHAVIOR AND IMPROVE TRANSPORTATION SYSTEMS.

Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

(Code:) (Expenses \$ 2,233,066 including grants of \$) (Revenue \$ 493,686)

INDIA MOBILITY - HELPING INDIA TO CREATE A SHARED, ELECTRIC, AND CONNECTED MOBILITY FUTURE THAT PROMISES TO PROVIDE INDIANS

WITH CLEAN, AFFORDABLE, EFFICIENT, AND RELIABLE TRANSPORTATION OPTIONS TO SUPPORT THE MOVEMENT OF GOODS AND PEOPLE AND TO ENHANCE THEIR DAILY LIVES.

(Code:) (Expenses \$ 1,533,849 including grants of \$) (Revenue \$ 534,772) INCLUDE: 1) EV-GRID - WORKING WITH UTILITIES, POLICYMAKERS, AND BUSINESSES TO MAKE ELECTRIC VEHICLE (EV) CHARGING EFFECTIVE

MOBILITY - ACCELERATING THE CHANGE TO A LOW-CARBON TRANSPORTATION SYSTEM ON AN AMBITIOUS SCALE. SUPPORTING INITIATIVES

AND SCALABLE, FOCUSING ON PERSONAL VEHICLES AND FLEETS.1) E-BUSES - ENSURING RAPID LEARNING AND ACCELERATING THE ECONOMIC SUSTAINABILITY OF ELECTRIC TRANSIT BUSES AROUND THE WORLD.2) MOBILITY INNOVATION LAB -PROVIDING A GROUNDBREAKING CHANGE

LAB THAT SUPPORTS INNOVATION, COLLABORATION, AND THE ACCELERATION OF THE BOTTOM-UP IDEAS THAT WILL TRANSFORM THE

TRANSPORTATION SYSTEM.3) MOBILITY DATA - FOCUSING ON WAYS IN WHICH BETTER DATA AND BETTER ANALYSIS CAN BOTH CHANGE

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

(Code:) (Expenses \$ 1,763,364 including grants of \$) (Revenue \$ 161,411)

MARKETING AND COMMUNICATIONS - THE MARKETING AND COMMUNICATIONS TEAM USES COMPELLING COMMUNICATIONS TO AMPLIFY RMI'S WORK AND IMPACT. OUR OBJECTIVES ARE TO PROVIDE A STRATEGIC COMMUNICATIONS LENS TO PROGRAMS IN ORDER TO SET PROGRAM DIRECTION, AND REACH SHORT- AND LONG-TERM IMPACTS, OUTCOMES, AND OUTPUTS THAT ACHIEVE THE DESIRED IMPACT; AND TO PROVIDE

COORDINATED TACTICAL SUPPORT TO PROGRAMS WITH HIGH QUALITY MEDIA, SOCIAL MEDIA, EDITORIAL, AND DESIGN SUPPORT.

UNITED STATES AND AIM TO BRING MORE THAN 60 GIGAWATTS (GW) OF NEW RENEWABLES ONLINE IN THE UNITED STATES BY 2025.

(Code:) (Expenses \$ 1,454,708 including grants of \$) (Revenue \$ RMI VENTURES AND THE ENERGY COLLABORATIVE - HELPING TO SUPERCHARGE INVESTMENT IN CLEANTECH WHILE FOSTERING RMI MARKET

AFFILIATES, WHICH CURRENTLY INCLUDE: 1) BLACK BEAR ENERGY - A FOR-PROFIT ENTITY THAT WORKS WITH CLIENTS TO IDENTIFY, PROCURE. AND EXECUTE NEW RENEWABLE ENERGY, STORAGE, AND EFFICIENCY PROJECTS. 2) WATTTIME - CREATES TECHNOLOGY SOLUTIONS THAT MAKE IT EASY FOR ANYONE TO ACHIEVE EMISSIONS REDUCTIONS WITHOUT COMPROMISING COST, COMFORT, OR FUNCTION.3) THE

ENERGY WEB FOUNDATION - A GLOBAL NON-PROFIT FOCUSED ON ACCELERATING BLOCKCHAIN TECHNOLOGY ACROSS THE ENERGY SECTOR TO

REDUCE ENERGY TRANSACTION COSTS, ENABLE GREATER CUSTOMER PARTICIPATION, AND SPEED THE TRANSITION TOWARD A CLEANER, MORE

RESILIENT, AND MORE COST-EFFECTIVE SYSTEM.4) RENEWABLE ENERGY BUYERS ALLIANCE - FOCUSED ON TURBOCHARGING CORPORATE RENEWABLE ENERGY PROCUREMENT. ITS 300 MEMBERS REPRESENT THE LARGEST GROUP OF CORPORATE RENEWABLE ENERGY BUYERS IN THE

(A) (E) (B) (C) (D) (F) Name and Title Position (do not check more Reportable Estimated Average Reportable than one box, unless amount of other hours per compensation compensation week (list person is both an officer from related compensation from the any hours and a director/trustee) organization organizations from the

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319,140

285,994

268,281

285,113

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39,655

17,384

33,545

34,899

11,574

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organization and

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	MISC)	related organizations
JULES KORTENHORST CHIEF EXECUTIVE OFFICER	40.00 1.00	Х		х				647,458	0	45,653
AMORY LOVINS THRU 92019 CHIEF SCIENTIST	40.00	х		x				397,508	0	29,468
JON CREYTS MANAGING DIRECTOR	40.00				х			379,385	0	42,017
MARTHA PICKETT GENERAL COUNSEL-SECRETARY	40.00 1.00	Х		х				381,635	0	31,886
JAMES NEWCOMB	40.00	1			x			368,917	0	37.512

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MARTHA PICKETT
GENERAL COUNSEL-SECRETARY
JAMES NEWCOMB
MANAGING DIRECTOR

PAUL BODNAR

EDWARD HARVEY

JAMES MANDEL

BRUCE NILLES

CFO

MANAGING DIRECTOR

MANAGING DIRECTOR

MANAGING DIRECTOR

HEATHER MCCREERY

MANAGING DIRECTOR

......

and Independent Contractors

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

MANAGING DIRECTOR

JUSTIN LOCKE

BRITTA GROSS

PRINCIPAL

SENIOR PRINCIPAL

MANAGING DIRECTOR

SENIOR PRINCIPAL

SENIOR PRINCIPAL

CLAY STRANGER

LILY DONGE THRU 122019

LARS THOMAS KOCH BLANK

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	1	 		,	,	(1)	(11) 5 (1.000	1
	for related organizations below dotted line)	Institutional Trustee	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
JENNIFER STOKES MANAGING DIRECTOR	40.00		х			249,892	0	26,261
BRAD MUSHOVIC THRU 72019 MANAGING DIRECTOR	40.00		х			237,252	0	28,909
LENA HANSEN MANAGING DIRECTOR	40.00		х			241,771	0	16,668
MARK CRUNDY	40.00							

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214,808

204,824

202,948

192,718

199,828

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20,149

19,420

17,276

23,010

22,504

32,041

24,070

MANAGING DIRECTOR	0.00				,	
LENA HANSEN	40.00		,		044 774	
MANAGING DIRECTOR	0.00		Х		241,771	
MARK GRUNDY	40.00		~		235,196	
MANAGING DIRECTOR	0.00		<		233,190	,
MISTY BURNS	40.00					
			Х		224,871	1

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

CHAIR OF THE BOARD

LEAD INDEPENDENT TRUSTEE

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JEAN OELWANG

TOM DINWOODIE

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

DAVID ALLEN

ROY BEDLOW

PETER BOYER

	any hours	and	a dir	recto		ustee))	organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
LEIA GUCCIONE	40.00				Х			208,128	0	9,256
MANAGING DIRECTOR	0.00				^			200,120	0	3,230
KOBEN CALHOUN	40.00					x		194,550	0	14,927
PRINCIPAL	0.00					^		194,550	0	14,92/
IAIN CAMPBELL MANAGING DIRECTOR	40.00				х			166,107	0	27,938
DICHENDA VAN LEEUWEN	40.00									

25,542

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PRINCIPAL	0.00			^	13 1,000	
IAIN CAMPBELL	40.00					
			Х		166,107	0
MANAGING DIRECTOR	0.00				•	
RICHENDA VAN LEEUWEN	40.00					
			Х		1 54.707	0
MANAGING DIRECTOR	0.00				20 1,7.0.	· ·
EDWARD WHITE	1.00					

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(A) (D) (E) (B) (C) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation week (list person is both an officer from the from related compensation from the

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

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TRUSTEE

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TRUSTEE

TODD STERN

GEORGE POLK

KANDEH YUMKELLA

MARY GRACE POWELL

ELIZABETH ANN SALL

	any hours	and	a dir	ecto	or/tr	ustee))	organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
MARK FERRON	1.00	Х						0	0	0
TRUSTEE	0.00							0	0	
MICHAEL HAAS TRUSTEE	0.00	Х						0	0	0
JOSE MARIA FIGUERES TRUSTEE	1.00	Х						0	0	0
	1.00									

		X			0	เ	ı
TRUSTEE	0.00						
JOSE MARIA FIGUERES	1.00						ſ
	•••••	Χ			0	0	Ĺ
TRUSTEE	0.00						L
RACHEL KYTE	1.00						ſ
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TRUSTEE	0.00	,				-	L
DENNIS V MCGINN	1.00						Γ

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and Independent Contractors
(A)

MARIA VAN DER HOEVEN

TRUSTEE

Name and Title

hours per week (list any hours for related organizations below dotted line)
 1.00

0.00

(B)

Average

Position (do not check more than one box, unless person is both an officer and a director/trustee) Institutiona employee Х

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

Reportable compensation from the organization (W-2/1099-MISC)

(D)

Reportable compensation from related organizations (W- 2/1099-MISC)

(E)

Estimated amount of other compensation from the organization and related organizations

CITIC	e GR/	<u>APHIC prii</u>	t - DO NOT PROC	ESS	As Filed Data -			DLN: 9	3493089014161
SCI		ULE A	Dub	lic C	harity Statu	e and Dul	hlic Sunn	ort	OMB No. 1545-0047
	m 990			the or	ganization is a sect 4947(a)(1) nonexe Attach to Form	ion 501(c)(3) empt charitable	organization or trust.		2019
		the Treasury	► Go to <u>wu</u>	/w.irs.	gov/Form990 for i	nstructions and	I the latest info	ormation.	Open to Public Inspection
Name	e of th	nue Service ne organiza ITAIN INSTITU						Employer identific	<u> </u>
KOCKI	11001							74-2244146	
Pai			or Public Charity					See instructions.	
	rganız		private foundation be		•	•		/A\/:\	
1		,	onvention of churches						
2	Ш		scribed in section 17			,			
3			er a cooperative hospit		_			•	
4		A medical r name, city,	esearch organization c and state:	perate	d in conjunction with	a hospital descri	ibed in section :	170(b)(1)(A)(iii). E	nter the hospital's
5			ition operated for the li iv). (Complete Part II		of a college or unive	rsity owned or op	perated by a gov	ernmental unit descri	bed in section 170
6		A federal, s	tate, or local governm	ent or	governmental unit de	scribed in sectio	on 170(b)(1)(A	۱)(v).	
7	✓		ition that normally rec 0(b)(1)(A)(vi). (Cor			s support from a	governmental u	ınit or from the gener	al public described in
8		A communi	ty trust described in s e	ection	170(b)(1)(A)(vi).	(Complete Part I	I.)		
9			ıral research organizat ant college of agricult						ege or university or a
10		from activit investment	ition that normally rec ies related to its exem income and unrelated see section 509(a)(2	pt func busine	tions—subject to cer ss taxable income (le	tain exceptions,	and (2) no more	than 331/3% of its su	
11		An organiza	ition organized and op	erated	exclusively to test fo	r public safety. S	See section 509	(a)(4).	
12		more public	ition organized and op ly supported organiza through 12d that des	tions de	escribed in section 5	09(a)(1) or se	ction 509(a)(2). See section 509(a	
а		organizatio	upporting organization n(s) the power to regu Part IV, Sections A a	larly ap					
b		manageme	supporting organization of the supporting or olete Part IV, Section	ganizat	ion vested in the sar				
c			unctionally integrate organization(s) (see in:						ited with, its
d		Type III n	on-functionally interintegrated. The organ). You must complet	grated nization	. A supporting organi generally must satis	zation operated fy a distribution	in connection wi	th its supported organ	
e		Check this	oox if the organization or Type III non-functi	receive	ed a written determir	ation from the I		pe I, Type II, Type II	I functionally
f	Enter		of supported organiza			-			
g	Provi	de the follow	ing information about	the sup	ported organization(s).		_	
	(i) N	lame of supp organizatior		IN	(iii) Type of organization (described on lines 1- 10 above (see instructions))		anization listed ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
						Yes	No		
Total			tion Act Notice, see			Cat. No. 11285			90 or 990-EZ) 2019

	(Complete only if you cl If the organization failed						qualify u	nder Part III.
	Section A. Public Support	a to quality affac	T the tests listee	a below, piedse	complete rare ii	<u>., </u>		
_	Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2	2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") .	25,775,229	30,681,267	34,404,403	46,041,026	53	3,633,659	190,535,584
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4 5	Total. Add lines 1 through 3 The portion of total contributions by	25,775,229	30,681,267	34,404,403	46,041,026	53	3,633,659	190,535,584
5	each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).							51,987,367
6	Public support. Subtract line 5 from line 4.							138,548,217
_	Section B. Total Support	l		l				
_	Calendar year	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2	2019	(f) Total
7	(or fiscal year beginning in) ► Amounts from line 4	25,775,229	30,681,267	34,404,403	46,041,026		3,633,659	190,535,584
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	43,879	87,981	85,061	60,079		93,986	370,986
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).	246	8,374	10,143	9,754		725	29,242
11	Total support. Add lines 7 through 10							190,935,812
12	Gross receipts from related activities,	etc. (see instruction	ons)			12		32,799,793
13	First five years. If the Form 990 is f	or the organization	n's first, second, th	ird, fourth, or fifth	ı tax year as a sect	ion 501(c)(3) organ	nization,
	check this box and stop here						▶□	
	Section C. Computation of Publi	ic Support Perc	entage					
14	Public support percentage for 2019 (l	ine 6, column (f) d	ivided by line 11, o	column (f))		14		72.560 %
	Public support percentage for 2018 Se					15		70.220 %
16	3 33 1/3% support test—2019. If the	e organization did	not check the box	on line 13, and lin	e 14 is 33 1/3% or	more, c	heck this b	ox
ŀ	and stop here. The organization qua 33 1/3% support test—2018. If the	he organization did	I not check a box c	on line 13 or 16a, a	and line 15 is 33 1/	3% or m	nore, check	this
17	box and stop here. The organization a 10%-facts-and-circumstances tes is 10% or more, and if the organization in Part VI how the organization meets	st— 2019. If the or on meets the "facts	ganization did not s-and-circumstance	check a box on lines" test, check this	ne 13, 16a, or 16b, s box and stop he	and line re. Expla	: 14 ain	. ▶⊔
Ŀ	organization . 10%-facts-and-circumstances te 15 is 10% or more, and if the organi Explain in Part VI how the organizati	st—2018. If the o	rganization did not facts-and-circumst	t check a box on li tances" test, check	ne 13, 16a, 16b, o < this box and stor	r 17a, ar here.	nd line	
1 2	supported organization	ion did not check a	box on line 13			 and see		▶□
10	bestweet's a			,,,	. =, check this box			⊾ □

Р	art III Support Schedule for						
	(Complete only if you cl						er Part II. If
S	the organization fails to ection A. Public Support	quality under	the tests listed i	pelow, please co	ompiete Part II.)		
30	Calendar year	() 2015	(1) 2016	() 2247	(1) 2010		(O.T.)
	(or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not include any "unusual grants.").						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business						
4	under section 513 Tax revenues levied for the						
•	organization's benefit and either paid						
_	to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
L	3 received from disqualified persons Amounts included on lines 2 and 3						
D	received from other than disqualified						
	persons that exceed the greater of						
	\$5,000 or 1% of the amount on line 13 for the year.						
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6.)						
Se	ection B. Total Support		1				Г
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources.						
b	Unrelated business taxable income						
	(less section 511 taxes) from						
	businesses acquired after June 30, 1975.						
С	Add lines 10a and 10b.						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly carried on.						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
12	(Explain in Part VI.) Total support. (Add lines 9, 10c,						
13	11, and 12.).						
14	First five years. If the Form 990 is for	the organization	n's first, second, th	nird, fourth, or fift	h tax year as a sec	tion 501(c)(3) o	ganization <u>,</u>
	check this box and stop here						▶ ⊔
	ection C. Computation of Public S			! (6))		1 1	
15	Public support percentage for 2019 (lin		•			15	
16	Public support percentage from 2018 S	-	<u> </u>			16	
	ection D. Computation of Investr Investment income percentage for 201			line 13 column (f	:))	17	
17 10	Investment income percentage for 201	-		-		17	
18 10-	331/3% support tests—2019. If the		•			18 33 1/3% and lin	e 17 is not
	more than 33 1/3%, check this box and s						
	more than 33 1/3%, check this box and s 33 1/3% support tests—2018. If the						
ט	not more than 33 1/3%, check this box	-			•		_
20	Private foundation. If the organization	-	-				
	Frivate foundation. If the organization	ni ulu not check a	a DOX ON UNE 14, I	.a, or iad, check	, unis pox and see I	HSGRUCGONS	. 📂 📖

Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete

10a

answer line 10b below.

the organization had excess business holdings).

Sections A and D, and complete Part V.) Section A. All Supporting Organizations Yes No

Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain. 1 Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2). 2

Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below. 3a Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the

determination. 3b Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. 3с

Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below. 4a Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or

4b supervised by or in connection with its supported organizations. Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes. 4c Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and

(c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by 5a amendment to the organizing document).

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? 5b

5c Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other 6

supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) . 7

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

8 complete Part I of Schedule L (Form 990 or 990-EZ). 8

Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as

defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

provide detail in Part VI. 9a

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Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting
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than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its

organization had an interest? If "Yes," provide detail in Part VI.

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10b

Schedule A (Form 990 or 990-EZ) 2019

9b

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Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in
which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
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Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

ciie	ddie A (Form 990 of 990-22) 2019			age :
Pai	Tt IV Supporting Organizations (continued)			
			Yes	No
	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .	11c		
	ection B. Type I Supporting Organizations			
	solon Britype Leapporting enganizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.			
	Did the supprise time and the bounds of any supprised arrangement of the theory of a constant arrangement of the	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting			
	organization.	2		
S	ection C. Type II Supporting Organizations			
	second Type 11 supporting organizations		Yes	No
L	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of			
	each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Se	ection D. All Type III Supporting Organizations			
			Yes	No
L	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing			
	documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).			
,	Division of the valationahin described in (2) did the consciention's consequent on the large spinnificant value in the	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
Se	ection E. Type III Functionally-Integrated Supporting Organizations			
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction)	ions):		
ā	The organization satisfied the Activities Test. Complete line 2 below.			
ŀ	The organization is the parent of each of its supported organizations. Complete line 3 below.			
	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instru	ctions)	
2	Activities Test. Answer (a) and (b) below.	1	Yes	No
á	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
ŀ	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.	20		
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
i	Did the organizations? Provide details in Part VI. Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard.	3h		

	ule A (Form 990 or 990-EZ) 2019			Page
Par	Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgani	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organizations.			
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally-instructions)	tegrate	d Type III supporting o	rganization (see

2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in Part VI). See instructions	
7	Total annual distributions. Add lines 1 through 6.	

5	Qualified set-aside amounts (prior IRS approval require	ed)		
6	Other distributions (describe in Part VI). See instruction	ons		
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to whe details in Part VI). See instructions	nich the organization is respons	sive (provide	
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions	(iii) Distributable

113		
nich the organization is respon	sive (provide	
(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
	Underdistributions	Distributable
		nich the organization is responsive (provide

Schedule A (Form 990 or 990-EZ) (2019)

3 Excess distributions carryover, if any, to 2019:

g Applied to underdistributions of prior years h Applied to 2019 distributable amount i Carryover from 2014 not applied (see

a Applied to underdistributions of prior years b Applied to 2019 distributable amount c Remainder. Subtract lines 4a and 4b from 4. 5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI.

6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2020. Add lines

a Excess from 2015. **b** Excess from 2016. c Excess from 2017. **d** Excess from 2018. e Excess from 2019.

j Remainder. Subtract lines 3g, 3h, and 3i from 3f. 4 Distributions for 2019 from Section D, line 7:

a From 2014. **b** From 2015. c From 2016. **d** From 2017. e From 2018. f Total of lines 3a through e

instructions)

See instructions.

3j and 4c. 8 Breakdown of line 7:

\$

Schedule A (F	-orm 990 or 990-EZ) 2	Page 8	ŏ
	Section A, lines 1, 2, 2 Part IV, Section D, lin	mation. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; es 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See	
		Facts And Circumstances Test	
			_
990 Sched	ule A, Supplemen	tal Information	-
	urn Reference	Explanation	1
SCHEDULE A	A, PART II, LINE 10, ON OF OTHER	OTHER INCOME - 2015 AMOUNT: \$ 246. 2016 AMOUNT: \$ 8,374. 2017 AMOUNT: \$ 10,143. 2018 AMOUNT: \$ 9,754. 2019 AMOUNT: \$ 725.	

000 571 3010

INCOME:

• Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

Political Campaign and Lobbying Activities

OMB No. 1545-0047

DLN: 93493089014161

Open to Public

Department of the Treasury Internal Revenue Service

EZ)

SCHEDULE C (Form 990 or 990-

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ. ▶Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

Inspection

		01(c)(3)) organizations: Complete Parts	I-A and C below.	Do not complete Part I-B.	
	Section 527 organizations: Complet		00 EZ Dant\// Iin	a 47 (Labbuina Astivitia	\
		n Form 990, Part IV, Line 4, or Form 9 have filed Form 5768 (election under s			
		have NOT filed Form 5768 (election un			
f the	e organization answered "Yes" or	n Form 990, Part IV, Line 5 (Proxy Tax			
	xy Tax) (see separate instructions				
	Section 501(c)(4), (5), or (6) organized me of the organization	ations. Complete Part III.		Employer iden	tification number
	CKY MOUNTAIN INSTITUTE			Limployer iden	cincution number
				74-2244146	
Par	t I-A Complete if the organ	nization is exempt under sectio	n 501(c) or is	a section 527 organiz	zation.
1	"political campaign activities")	ization's direct and indirect political can	, ,	`	or definition of
2		itures (see instructions)			\$
3		aign activities (see instructions)			
Par	t I-B Complete if the organ	nization is exempt under sectio	n 501(c)(3).		
1	Enter the amount of any excise ta	x incurred by the organization under se	ction 4955	>	\$
2	Enter the amount of any excise ta	x incurred by organization managers ur	nder section 4955		\$
3	If the organization incurred a sect	ion 4955 tax, did it file Form 4720 for t	his year?		☐ Yes ☐ No
4a	Was a correction made?				☐ Yes ☐ No
b	If "Yes," describe in Part IV.				
Par	t I-C Complete if the organ	nization is exempt under sectio	n 501(c), exce	ept section 501(c)(3)	•
1	Enter the amount directly expend	ed by the filing organization for section	527 exempt functi	ion activities 🕨	\$
2		anization's funds contributed to other o	-	·	\$
3	Total exempt function expenditure	es. Add lines 1 and 2. Enter here and or	Form 1120-POL,	line 17b ▶	\$
4	Did the filing organization file For	m 1120-POL for this year?			☐ Yes ☐ No
5	organization made payments. For of political contributions received	employer identification number (EIN) of each organization listed, enter the amo that were promptly and directly delivere ee (PAC). If additional space is needed,	ount paid from the ed to a separate po	filing organization's funds. olitical organization, such a	Also enter the amount
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
1					
2					
3					
1					
5					
5					
or F	Paperwork Reduction Act Notice, see t	the instructions for Form 990 or 990-EZ.	Cat.	No. 50084S Schedule C (Form 990 or 990-EZ) 2019

Grassroots lobbying expenditures

Return Reference

For e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a)	(b))
ctivi		Yes	No	Amou	ınt
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
С	Media advertisements?				
d	Mailings to members, legislators, or the public?				
e	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total. Add lines 1c through 1i				
a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	76 H = 61				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	(5), o	r secti	on	
	,	(5), o	r secti		. N
ar	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).		r secti	Yes	s N
ar	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members?		r secti	Yes	i N
ar	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less?		E	Yes	s N
Par	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members?		 [Yes 1 2 3	
ar	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less?	 (5), o	 r secti	Yes 1 2 3 on 501(
ar	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? tiii-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part	 (5), o	 r secti	Yes 1 2 3 on 501(
ar	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? **TIII-B** Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."	(5), o	 r secti	Yes 1 2 3 on 501(
ar	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? TIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year	(5), o III-A	 r secti	Yes 1 2 3 on 501(
ar ar b	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? TIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year	(5), o III-A 1 2a 2b	 r secti	Yes 1 2 3 on 501(
ar ar b	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? TIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total	(5), o III-A 1 2a 2b 2c	 r secti	Yes 1 2 3 on 501(
ar ar b	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	(5), o III-A 1 2a 2b	 r secti	Yes 1 2 3 on 501(
Par	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? LIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues . If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political	1 2a 2b 2c 3	 r secti	Yes 1 2 3 on 501(
ar ar b	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues . If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does	(5), o III-A 1 2a 2b 2c	 r secti	Yes 1 2 3 on 501(

Explanation

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -SCHEDULE D

DLN: 93493089014161

OMB No. 1545-0047

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

Name of the organization **Employer identification number** ROCKY MOUNTAIN INSTITUTE 74-2244146 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible ☐ Yes ☐ No Part II **Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Year 2b Number of conservation easements on a certified historic structure included in (a) 20 Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register . . . Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 tax year 🟲 Number of states where property subject to conservation easement is located > 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) ☐ Yes In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of

art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 52283D Schedule D (Form 990) 2019

 $\boldsymbol{c} \ \ \text{Leasehold improvements}$ \boldsymbol{d} Equipment

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

e Other . .

	edule D (Form 990) 2019								Page 2
Par	t IIII Organizations Maintaining								
3	Using the organization's acquisition, accitems (check all that apply):	ession, and other record		any of t	he following	that are a	significant u	ise of its co	ollection
а	Public exhibition		d		Loan or exch	ange prog	ırams		
b	☐ Scholarly research		е		Other				
С	Preservation for future generation	ıs							
4	Provide a description of the organization Part XIII.	n's collections and explai	n how the	y furth	er the organi	zation's ex	kempt purpo	se in	
5	During the year, did the organization so assets to be sold to raise funds rather t							☐ Yes	□ No
Pa	rt IV Escrow and Custodial Arra Complete if the organization X, line 21.		orm 990	, Part	IV, line 9, c	r reporte	ed an amou	ınt on For	m 990, Part
1a	Is the organization an agent, trustee, coincluded on Form 990, Part X?							☐ Yes	□ No
b	If "Yes," explain the arrangement in Pa	t XIII and complete the	following	table:			A	mount	
С	Beginning balance					1c			
d	Additions during the year					1d			
е	Distributions during the year					1e			
f	Ending balance					1f			
2 a	Did the organization include an amount	on Form 990, Part X, lin	e 21, for	escrow	or custodial	account lia	bility?	☐ Yes	 □ No
b	If "Yes," explain the arrangement in Par							_	
	rt V Endowment Funds.	T / (111) OHOUR HOTE II GHO	СХРІСПІС		been promae				
	Complete if the organization	answered "Yes" on F	orm 990	, Part	IV, line 10.				
	· · · · · · · · · · · · · · · · · · ·	(a) Current year		rior year		years back	(d) Three yea	ars back (e) Four years back
1 a	Beginning of year balance	1,006,40	1	971,	159	922,691		884,692	986,528
b	Contributions	4,35	0	29,	597	14,575		6,650	8,000
c	Net investment earnings, gains, and losse	es 42,08	2	37,	165	65,521		78,141	-9,811
d	Grants or scholarships								
е	Other expenditures for facilities and programs	20,57	4	19,	422	19,388		35,926	100,025
f	Administrative expenses	12,76	1	12,	098	12,240		10,866	
g	End of year balance	1,019,49	8	1,006	401	971,159		922,691	884,692
2 a	Provide the estimated percentage of the Board designated or quasi-endowment	•	ce (line 19	g, colun	nn (a)) held a	as:			
b	Permanent endowment ► 91.090 %)							
c	Temporarily restricted endowment ►	8.910 %							
-	The percentages on lines 2a, 2b, and 2c	should equal 100%.							
3a	Are there endowment funds not in the porganization by:	ossession of the organiz	ation that	t are he	ld and admir	istered fo	r the		Yes No
	(i) unrelated organizations							3a(i) Yes
	(ii) related organizations							3a(ii	i) No
b	If "Yes" on 3a(ii), are the related organi	zations listed as require	d on Sche	dule R?				3b	
4	Describe in Part XIII the intended uses		lowment f	unds.					
Pa	rt VI Land, Buildings, and Equi Complete if the organization		orm 990	. Part	[V. ine 11a	. See Foi	m 990 Pa	rt X. line	10.
	Description of property (a) Cos		ost or other	<u> </u>		cumulated o			Book value
	Land								
	Buildings			16,09	3,876		1,795,158		14,303,718

373,975

1,250,689

1,494,192

157,031

332,057

732,981

216,944

918,632

761,211

	Form 990) 2019			
Part VII	Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, I	Part IV, line	<u>: 11b.See Form</u> 990, F	Part X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Metho	d of valuation: year market value
	derivatives			
١)				
3)				
:)				
D)				
:)				
=)				
G)				
Η)				
	(b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments—Program Related. Complete if the organization answered 'Yes' on Form 990, I	Part IV, line	e 11c. See Form 990,	Part X, line 13.
	(a) Description of investment		(b) Book value	(c) Method of valuation: Cost or end-of-year market
1)				value
2)				
3)				
¥)				
5)				
5)				
') ')				
3)				
• ,				
9)				
	(h) must squal Form 900. Part V. cal (B) line 12.)			
Part IX	(b) must equal Form 990, Part X, col.(B) line 13.) Other Assets.		•	
otal. (Column	, , , , , ,	art IV, line	•	t X, line 15. (b) Book value
otal. (Column	Other Assets. Complete if the organization answered 'Yes' on Form 990, P	art IV, line	•	t X, line 15. (b) Book value
otal. (Column	Other Assets. Complete if the organization answered 'Yes' on Form 990, P	art IV, line	•	t X, line 15. (b) Book value
Part IX	Other Assets. Complete if the organization answered 'Yes' on Form 990, P	art IV, line	•	t X, line 15. (b) Book value
Part IX 1) 2)	Other Assets. Complete if the organization answered 'Yes' on Form 990, P	art IV, line	•	t X, line 15. (b) Book value
Part IX 1) 2) 3)	Other Assets. Complete if the organization answered 'Yes' on Form 990, P	art IV, line	•	t X, line 15. (b) Book value
Part IX 1) 2) 3)	Other Assets. Complete if the organization answered 'Yes' on Form 990, P	art IV, line	•	t X, line 15. (b) Book value
Part IX 1) 2) 3) 4) 5)	Other Assets. Complete if the organization answered 'Yes' on Form 990, P	art IV, line	•	t X, line 15. (b) Book value
2) 3) 3) 5) 7)	Other Assets. Complete if the organization answered 'Yes' on Form 990, P	art IV, line	•	t X, line 15. (b) Book value
2) 3) 1) 5) 6)	Other Assets. Complete if the organization answered 'Yes' on Form 990, P (a) Description	art IV, line	•	t X, line 15. (b) Book value
Part IX 1) 2) 3) 4) 5) 7) otal. (Column	Other Assets. Complete if the organization answered 'Yes' on Form 990, P (a) Description		•	t X, line 15. (b) Book value
Part IX 1) 2) 3) 4) 5) 7) 8) otal. (Column	Other Assets. Complete if the organization answered 'Yes' on Form 990, P (a) Description (b) must equal Form 990, Part X, col.(B) line 15.)		11d. See Form 990, Par	(b) Book value
Part IX 1) 2) 3) 4) 5) 6) 7) 8) otal. (Columnation of the columnation of the col	Other Assets. Complete if the organization answered 'Yes' on Form 990, P (a) Description (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities.		11d. See Form 990, Par	(b) Book value
Part IX 1) 2) 3) 4) 5) 6) 7) btal. (Column Part X 1) Federal i	Other Assets. Complete if the organization answered 'Yes' on Form 990, P (a) Description mn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on Form 990, P (a) Description of liability ncome taxes		11d. See Form 990, Par	(b) Book value Page
Part IX 1) 2) 3) 4) 5) 6) 7) Bart IX 1) 1) 1) 1) 1) 1) 1) 1) 1) 1	Other Assets. Complete if the organization answered 'Yes' on Form 990, P (a) Description mn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on Form 990, P (a) Description of liability ncome taxes		11d. See Form 990, Par	(b) Book value Page
Part IX 1) 2) 3) 4) 5) 6) 7) btal. (Column Part X 1) Federal i 2) DEFERRE 3)	Other Assets. Complete if the organization answered 'Yes' on Form 990, P (a) Description mn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on Form 990, P (a) Description of liability ncome taxes		11d. See Form 990, Par	(b) Book value Page
Part IX 2) 3) 4) 5) 6) 7) Part X L) Federal i 2) DEFERRE 3)	Other Assets. Complete if the organization answered 'Yes' on Form 990, P (a) Description mn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on Form 990, P (a) Description of liability ncome taxes		11d. See Form 990, Par	(b) Book value Page
potal. (Column Part IX 1) 2) 3) 4) 5) 6) 7) botal. (Column Part X 1) Federal i 2) DEFERRE 3) 4)	Other Assets. Complete if the organization answered 'Yes' on Form 990, P (a) Description mn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on Form 990, P (a) Description of liability ncome taxes		11d. See Form 990, Par	(b) Book value Page
potal. (Column Part IX 1) 2) 3) 4) 5) 6) Otal. (Column Part X . 1) Federal i 2) DEFERRE 3) 4) 5)	Other Assets. Complete if the organization answered 'Yes' on Form 990, P (a) Description mn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on Form 990, P (a) Description of liability ncome taxes		11d. See Form 990, Par	(b) Book value Page
potal. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) otal. (Column Part X	Other Assets. Complete if the organization answered 'Yes' on Form 990, P (a) Description mn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on Form 990, P (a) Description of liability ncome taxes		11d. See Form 990, Par	(b) Book value Page
ptal. (Column Part IX 1) 2) 3) 4) 5) 6) Otal. (Column Part X 1) Federal i 2) DEFERRE 3) 4) 5)	Other Assets. Complete if the organization answered 'Yes' on Form 990, P (a) Description mn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on Form 990, P (a) Description of liability ncome taxes		11d. See Form 990, Par	(b) Book value Page
part IX 1) 2) 3) 4) 5) 6) 7) Bart X 1) Federal i 2) DEFERRE 3) 4) 5) 7)	Other Assets. Complete if the organization answered 'Yes' on Form 990, P (a) Description mn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on Form 990, P (a) Description of liability ncome taxes		11d. See Form 990, Par	(b) Book value Page

2

1

2

C

d

е 3

b

Part XIII

See Additional Data Table

4

5

Schedule D (Form 990) 2019

Page 4

90,203

5,110

61,859,156

61,864,266

53,006,334

391,711

5,110

52,614,623

52.619.733

Schedule D (Form 990) 2019

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Other (Describe in Part XIII.) 2d -10.320

d Add lines 2a through 2d e

Subtract line 2e from line 1 3 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:

Amounts included on line 1 but not on Form 990, Part VIII, line 12:

b

Add lines **4a** and **4b** C

5

Part XII

Total expenses and losses per audited financial statements

Amounts included on line 1 but not on Form 990, Part IX, line 25:

Amounts included on Form 990, Part IX, line 25, but not on line 1:

Investment expenses not included on Form 990, Part VIII, line 7b . . .

Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)

XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part

Donated services and use of facilities . . .

Prior year adjustments

Subtract line 2e from line 1

Add lines **4a** and **4b**

Supplemental Information

Other (Describe in Part XIII.) . . .

Add lines 2a through 2d .

Return Reference

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Investment expenses not included on Form 990, Part VIII, line 7b .

4a 4b

2a

2b

2c

2d

4a

4b

Explanation

69,442

322,269

5,110

5,110

4c 5

2e

3

4c

5

2e

3

chedule D (Form 990) 2019	Page 5
Part XIII Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2019

Additional Data

Software ID: Software Version:

EIN: 74-2244146

Name: ROCKY MOUNTAIN INSTITUTE

Supplemental Information

Return Reference

Explanation

Supplemental Information	
Return Reference	Explanation
PART X, LINE 2:	RMI APPLIES A MORE-LIKELY-THAN-NOT MEASUREMENT METHODOLOGY TO REFLECT THE FINANCIAL STATEM ENT IMPACT OF UNCERTAIN TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. AFTER EVALUATING THE TAX POSITIONS TAKEN, NONE ARE CONSIDERED TO BE UNCERTAIN; THEREFORE, NO AM OUNTS HAVE BEEN RECOGNIZED AS OF JUNE 30, 2020 AND 2019. IF INCURRED, INTEREST AND PENALTI ES ASSOCIATED WITH TAX POSITIONS ARE RECORDED IN THE PERIOD ASSESSED AS GENERAL AND ADMINI STRATIVE EXPENSE. NO INTEREST OR PENALTIES HAVE BEEN ASSESSED AS OF JUNE 30, 2020 AND 2019

upplemental Information					
Return Reference	Explanation				
PART XI, LINE 2D - OTHER ADJUSTMENTS:	CHANGE IN NET ASSETS HELD AT THE DENVER FOUNDATION -10,320.				

Sι

upplemental Information							
Return Reference	Explanation						
PART XII, LINE 2D - OTHER ADJUSTMENTS:	WRITE-OFF OF PLEDGES RECEIVABLE 322,269.						

SCHEDULE F	State	ement of A	Activities (Outside the Un	ited States	OMB No. 1545-0047
Form 990)	► Comp	2019				
Department of the Treasury	•	Go to www.irs.	nformation.	Open to Public Inspection		
lame of the organization					Employer ide	ntification number
ROCKY MOUNTAIN INSTITU	UTE				74-2244146	
Part I General In Form 990, F			Outside the U	Jnited States. Comple	ete if the organization a	answered "Yes" on
1 For grantmakers.	. Does the or	ganization mai	intain records to	substantiate the amoun	t of its grants and	
•	•	,	-	stance, and the selection		
to award the grants	s or assistan	ce?				🗹 Yes 🗌 No
2 For grantmakers. outside the United		Part V the orga	anization's proce	dures for monitoring the	use of its grants and ot	her assistance
3 Activites per Region.	. (The followin	ng Part I, line 3	table can be dupli	cated if additional space is	s needed.)	
(a) Region		(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
See Add'l Data				,		
3a Sub-total			40			7,007,786
b Total from continuation						1,755.7.5
Part I	121)	0	-			325,087
	and 30)		L 40			7,332,873

Schedule F (Form 990)	J) 2019						•	Page 2			
	Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.										
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	- 	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)			
		EUROPE (INCLUDING ICELAND & GREENLAND)	INCENTIVIZE THE DEVELOPMENT OF A RESIDENTIAL COOLING SOLUTION THAT WILL HAVE AT LEAST FIVE TIMES LOWER CLIMATE IMPACT THAN THE STANDARD ROOM AC UNITS SOLD ON THE MARKET TODAY	100,000	WIRE						
		EAST ASIA AND THE PACIFIC	INCENTIVIZE THE DEVELOPMENT OF A RESIDENTIAL COOLING SOLUTION THAT WILL HAVE AT LEAST FIVE TIMES LOWER CLIMATE IMPACT THAN THE STANDARD ROOM AC UNITS SOLD ON THE MARKET TODAY	200,000	WIRE						
			above that are recogni					0			

Schedule F (Form 990) 2019

	uplicated if addit	(c) Number of		(a) Mannay of as -1-	(f) Amount of	(a) Decembring	(h) Math
ype of grant or assistance	(b) Region	recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other

Sched	dule F (Form 990) 2019		Page 4
Par	t IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)		
		☐ Yes	✓ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)		
		☐Yes	☑ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621).	Yes	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)		
	(✓ Yes	□No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990).	□Yes	✓ No
	3713, don't me man 1 01111 230).		

Scneaule F (1	orm 990) 2019 Page 5
	Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.
990 Sched	ule F, Supplemental Information Explanation
Reference	Explanation

990 Schedule F, Supplemental Information Return Reference Explanation

PART III ACCOUNTING METHOD:

Additional Data

EAST ASIA AND THE PACIFIC

Form 900 Schedule E Part T - Activities Outside The United States

Software ID: Software Version:

EIN: 74-2244146

Name: ROCKY MOUNTAIN INSTITUTE

CHINA

2,732,588

Form 990 Schedule F Par	orm 990 Schedule F Part 1 - Activities Outside The Officed States										
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region						
CENTRAL AMERICA AND THE CARIBBEAN	0	3		EMPOWERING CLEAN ECONOMIES	1,459,191						

20 PROGRAM SERVICES

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region agents in fundraising, program describe specific type of region services, grants to service(s) in region region recipients located in the reaion) EUROPE (INCLUDING ICELAND 3 PROGRAM SERVICES & BUILDINGS, EMPOWERING 1,471,634 AND GREENLAND) COMMUNICATIONS CLEAN ECONOMIES. COMMUNICATIONS, AND INDUSTRY MIDDLE EAST AND NORTH 0 PROGRAM SERVICES BUILDINGS 29,654 AFRICA

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures for region offices in the employees or in region (by type) (i.e., is a program service, agents in fundraising, program describe specific type of reaion service(s) in region region services, grants to recipients located in the reaion) NORTH AMERICA 2 PROGRAM SERVICES BUILDINGS AND 158,922 EMPOWERING CLEAN IECONOMIES. SOUTH AMERICA 0 PROGRAM SERVICES EMPOWERING CLEAN 30,149 IECONOMIES.

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) SOUTH ASIA 6 PROGRAM SERVICES INDIA 515,766 SUB-SAHARAN AFRICA 6 PROGRAM SERVICES EMPOWERING CLEAN 609,882 **IECONOMIES**

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of reaion agents in service(s) in region services, grants to reaion recipients located in the reaion) FAST ASIA AND THE PACIFIC 0 PROGRAM SERVICES INDUSTRY, BUILDINGS 325,087

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. Schedule I **Grants and Other Assistance to Organizations**, (Form 990) **Governments and Individuals in the United States** Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.

OMB No. 1545-0047

Open to Public

DLN: 93493089014161

epartment of the reasury nternal Revenue Service		► Go to <u>w</u> и	Mirs.gov/Form990 for		on.		Inspection
ame of the organization						Employer identific	ation number
OCKY MOUNTAIN INSTITUTE						74-2244146	
Part I General Inform	nation on Grants	and Assistance				•	
Does the organization mai the selection criteria used	ntain records to sub to award the grants	stantiate the amount of or assistance?	the grants or assistance,	the grantees' eligibility	for the grants or assistance	e, and	☑ Yes ☐ No
Describe in Part IV the org					1 10 1		
			and Domestic Governme ditional space is needed.	ents. Complete if the o	rganization answered "Yes"	on Form 990, Part IV, line	21, for any recipient
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
1) See Additional Data							
2)							
3)							
4)							
5)							
6)							
7)							
8)							
9)							
10)							
11)							
12)							
		-					0
or Paperwork Reduction Act Noti				Cat. No. 50055			nedule I (Form 990) 2019
	,					Scii	

Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

(6)

ELIGIBLE TO RECEIVE THIS SECOND INSTALLMENT.

Explanation

(7)

Part IV

PART I, LINE 2:

Return Reference

BETWEEN NOVEMBER 2019 AUGUST 2020, MONTHLY CALLS WERE HELD BETWEEN RMI AND EACH TEAM TO TRACK THEIR PROGRESS TOWARDS DEVELOPMENT OF THESE PROTOTYPES. THE SECOND INSTALLMENT OF \$100,000 WAS SUBJECT TO DELIVERY OF THE TWO PROTOTYPES TO INDIA FOR TESTING. ONLY THOSE TEAMS THAT DELIVER WORKING PROTOTYPES AS DETERMINED BY THE TECHNICAL REVIEW COMMITTEE AND CONFIRMED BY THE SUPERVISORY BOARD OF THE PRIZE ARE

Schedule I (Form 990) 2019

Additional Data

Software ID: Software Version: **EIN:** 74-2244146 Name: ROCKY MOUNTAIN INSTITUTE Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (c) IRC section (a) Name and address of (b) EIN (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable cash (book, FMV, appraisal, non-cash assistance or assistance grant or government assistance other) M2 THERMAL SOLUTIONS LLC 84-3613421 100,000 INCENTIVIZE THE 255 N SIERRA ST UNIT 1512 DEVELOPMENT OF A RENO, NV 89501 RESIDENTIAL COOLING SOLUTION THAT WILL HAVE AT LEAST FIVE TIMES LOWER CLIMATE IMPACT THAN THE STANDARD ROOM AC UNITS SOLD ON THE MARKET TODAY TRANSAERA INC 82-0685301 100,000 INCENTIVIZE THE 444 SOMERVILLE AVE DEVELOPMENT OF A SOMERVILLE, MA 02143 RESIDENTIAL COOLING SOLUTION THAT WILL HAVE AT LEAST FIVE

TIMES LOWER CLIMATE
IMPACT THAN THE
STANDARD ROOM AC
UNITS SOLD ON THE
MARKET TODAY

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) 20-0411521 100.000 KRATON POLYMERS LLC INCENTIVIZE THE 15710 JOHN F KENNEDY SUITE IDEVELOPMENT OF A RESIDENTIAL COOLING

MARKET TODAY

RESIDENTIAL COOLING
HOUSTON, TX 77032

RESIDENTIAL COOLING
SOLUTION THAT WILL
HAVE AT LEAST FIVE
TIMES LOWER CLIMATE
IMPACT THAN THE
STANDARD ROOM AC
UNITS SOLD ON THE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

efil	e GRAPHIC pr	int - DO NOT PROCESS	As Filed Data	a -	DLN: 93	49308	39014	161
Sch	edule J	Co	mpensati	ion Information	0	MB No.	1545-0	0047
(Form 990)		For certain Office	hest					
		► Complete if the orga	7, line 23. 2019					
ъ.			▶ Attach	to Form 990. instructions and the latest inform		Openi		
•	tment of the Treasury al Revenue Service	F do to <u>www.ms.gov</u>	7 <u>77 01111990</u> 101	mistractions and the latest miori		Insp	ectio	n
	me of the organiza CKY MOUNTAIN INST				Employer identifica	tion nu	ımber	
					74-2244146			
Pa	rt I Questi	ons Regarding Compensat	ion					
1 a				the following to or for a person liste y relevant information regarding the			Yes	No
		s or charter travel		,				
		companions	☑	Housing allowance or residence for Payments for business use of perso	•			
	_	nification and gross-up payments	_	Health or social club dues or initiati				
	Discretion	nary spending account		Personal services (e.g., maid, chau	ffeur, chef)			
b	If any of the hea	was an Lina 15 are shasked, did t	ho organization	follow a written policy regarding pay	mont or			
D				ve? If "No," complete Part III to expl		1b	Yes	
2				or allowing expenses incurred by all	1-3	2	Yes	
	airectors, truste	es, oπicers, including the CEO/E	xecutive Director	r, regarding the items checked on Lir	ne Ia?			
3				ed to establish the compensation of the check any boxes for methods	he			
	_	•		CEO/Executive Director, but explain	in Part III.			
	✓ Compensa	ation committee		Written employment contract				
	_ '	ent compensation consultant	<u> </u>	Compensation survey or study				
	☐ Form 990	of other organizations	✓	Approval by the board or compensa	ation committee			
4	During the year related organiza		90, Part VII, Se	ction A, line 1a, with respect to the f	iling organization or a			
а	Receive a sever	ance payment or change-of-cont	rol payment? .			4a	Yes	
b	Participate in, o	r receive payment from, a supple	mental nonqual	ified retirement plan?		4b		No
С	•			nsation arrangement?		4c		No
	If "Yes" to any o	or lines 4a-c, list the persons and	provide the app	olicable amounts for each item in Par	τ 111.			
	Only 501(c)(3), 501(c)(4), and 501(c)(29)	organizations	must complete lines 5-9.				
5		ed on Form 990, Part VII, Sectior ontingent on the revenues of:		the organization pay or accrue any				
а	The organization	1?				5a		No
b						5b		No
	•	5a or 5b, describe in Part III.						
6		ed on Form 990, Part VII, Sectior ontingent on the net earnings of:		the organization pay or accrue any				
a	-	1?				6a		No
b		anization?				6 b		No_
7	•	·	n A. line 1a did t	the organization provide any nonfixe	d			
•	payments not d	escribed in lines 5 and 6? If "Yes	," describe in Pa	rt III		7	Yes	
8	subject to the ir	nitial contract exception described	d in Regulations	red pursuant to a contract that was section 53.4958-4(a)(3)? If "Yes," d				
9	If "Yes" on line	8, did the organization also follov	v the rebuttable	presumption procedure described in	Regulations section	9		No
For F		iction Act Notice, see the Inst			50053T Schedule 3		1 990)	2019

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the to	otal	amount of For	m 990, Part VII, Se	ection A, line 1a, ap	pplicable column ([)) and (E) amoun	ts for that indi	vidual.	
(A) Name and Title		(B) Break	kdown of W-2 and/c compensation	or 1099-MISC	and other	(D) Nontaxable benefits	columns	Compensation in	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation		(B)(i)-(D)	column (B) reported as deferred on prior Form 990	
See Additional Data Table									
	\top								
	1								
	+								
							Schedule J (F	orm 990) 2019	

Schedule J (Form 990) 2019	Page 3							
Part III Supplemental Information								
Provide the information, explanation, or	descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.							
Return Reference	Explanation							
·	BUSINESS USE OF PERSONAL RESIDENCE - AMORY LOVINS RENTS APPROXIMATELY 493 SQ FT OF HIS PERSONAL RESIDENCE FOR RMI TO HOST TOURS, MEETINGS AND OTHER EVENTS AS NEEDED. THE ONE YEAR LEASE ENDS DECEMBER 31, 2020. THE RENT IS \$493 PER MONTH. BUSINESS CLASS IS ALLOWED FOR CERTAIN LONG HAUL FLIGHTS FOR RMI EMPLOYEES.							
	AMORY LOVINS, BRAD MUSHOVIC, AND LILY DONGE; THE CHIEF SCIENTIST, A MANAGING DIRECTOR, AND A PRINCIPAL RECEIVED A SEVERANCE/CHANGE OF CONTROL PAYMENT							
PART I, LINE 7	NON-FIXED PAYMENTS - SOME EMPLOYEES WERE PAID PERFORMANCE BONUSES AT THE DISCRETION OF MANAGEMENT.							

Schedule 1 (Form 990) 2019

Software ID: Software Version:

EIN: 74-2244146

Name: ROCKY MOUNTAIN INSTITUTE

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Form 990, Schedule	. J,	Part II - Officers, D	irectors, Trustees, K	ey Employees, and I	Hignest Compensate	a Employees		
(A) Name and Title		(B) Breakdown (i) Base Compensation	of W-2 and/or 1099-MIS	C compensation (iii)	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
			Bonus & incentive compensation	Other reportable compensation	compensation			reported as deferred on prior Form 990
1JULES KORTENHORST CHIEF EXECUTIVE OFFICER	(i)	347,458	225,000	75,000	13,042	32,611	693,111	0
	(ii)	0	0	0	0	0	0	0
1 AMORY LOVINS THRU	(i)	203,800	110,000	83,708	10,165	19,303	426,976	0
92019 CHIEF SCIENTIST	(ii)	0	0	0	0	0	0	0
2JON CREYTS MANAGING DIRECTOR	(i)	293,385	86,000	0	14,740	27,277	421,402	0
	(ii)	0	0	0	0	0	0	0
3 MARTHA PICKETT GENERAL COUNSEL- SECRETARY	(i) (ii)	295,635 0	86,000	0 	11,612	20,274 	413,521	0
4JAMES NEWCOMB	(i)	286,417	82,500	0	14,146	23,366	406,429	0
MANAGING DIRECTOR	(ii)	0	0	0	0	0	0	
5PAUL BODNAR MANAGING DIRECTOR	(i)	271,863	78,000	0	13,990	25,665	389,518	0
MANAGING DIRECTOR	(ii)	0	0	0	0	0	0	0
6 EDWARD HARVEY MANAGING DIRECTOR	(i)	259,140	60,000	0	12,750	4,634	336,524	0
THIN GIVE DIRECTOR	(ii)	0	0	0	0	0	0	0
7JAMES MANDEL MANAGING DIRECTOR	(i)	235,994	50,000	0	9,625	23,920	319,539	0
Thursday Birtheron	(ii)	0	0	0	0	0	0	0
8HEATHER MCCREERY CFO	(i)	214,781	53,500	0	9,531	25,368	303,180	0
	(ii)	0	0	0	0	0	0	0
9BRUCE NILLES MANAGING DIRECTOR	(i)	248,613	36,500	0	9,625	1,949	296,687	0
	(ii)	0	0	0	0	0	0	0
10 JENNIFER STOKES MANAGING DIRECTOR	(i)	199,892	50,000	0	9,521	16,740	276,153	0
	(ii)	0	0	0	0	0	0	0
11 BRAD MUSHOVIC THRU	(i)	104,752	42,500	90,000	4,875	24,034	266,161	0
72019 MANAGING DIRECTOR	(ii)	0	0	0	0	0	0	0
12LENA HANSEN MANAGING DIRECTOR	(i)	172,771	69,000	0	6,468	10,200	258,439	0
	(ii)	0	0	0	0	0	0	0
13MARK GRUNDY MANAGING DIRECTOR	(i)	192,696	42,500	0	9,503	10,646	255,345	0
	(ii)	0	0	0	0	0	0	0
14MISTY BURNS MANAGING DIRECTOR	(i)	197,371	27,500	0	9,521	9,899	244,291	0
	(ii)	0	0	0	0	0	0	0
15 JUSTIN LOCKE SENIOR PRINCIPAL	(i)	167,522	47,286	0	7,926	9,350	232,084	0
44007774 60066	(ii)	0	0	0	0	0	0	0
16 BRITTA GROSS MANAGING DIRECTOR	(i)	129,824 	75,000	0	6,771	16,239	227,834	0
17	(ii)	120.226	0	0	0	0	0	0
LILY DONGE THRU 122019 PRINCIPAL	(i)	129,236	0	73,712	6,798 	15,706	225,452	0
18	(ii)	150 710	0	0	0	0	0	0
LARS THOMAS KOCH BLANK	(i)	158,718	34,000	0	8,507	23,534	224,759 	0
SENIOR PRINCIPAL 19CLAY STRANGER	(ii)	0	0	0	0	0	0	0
SENIOR PRINCIPAL	(i)	153,328	46,500	0	7,656	16,414	223,898	0
	(ii)	0	0	0	0	0	0	0

(A) Name and Title (B) Breakdown of W-2 and/or 1099-MISC compensation (C) Retirement and (D) Nontaxable (E) Total of columns (F) Compensation in other deferred benefits (B)(i)-(D) column (B) (i) Base Compensation (iii) compensation reported as deferred on Bonus & incentive Other reportable prior Form 990 compensation compensation (:) 464430

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

166,107

154,707

PRINCIPAL

2IAIN CAMPBELL

MANAGING DIRECTOR

MANAGING DIRECTOR

3RICHENDA VAN LEEUWEN

MANAGING DIRECTOR	10	164,128	44,000	0	8,125	1,131	217,384	0
	(ii)	0	0	0	0	0	0	0
1KOBEN CALHOUN	(i)	104,640	25,000	64,910	6.284	8.643	209,477	0

19,688

17,730

8,250

7,812

194,045

180,249

DLN: 93493089014161 SCHEDULE M OMB No. 1545-0047 **Noncash Contributions** (Form 990) 2019 ▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Go to www.irs.gov/Form990 for the latest information. Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization **Employer identification number** ROCKY MOUNTAIN INSTITUTE 74-2244146 Part I Types of Property (a) (b) (c) (d) Check if Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 1 Art—Works of art . . Art—Historical treasures Art—Fractional interests 4 Books and publications Clothing and household goods Cars and other vehicles **7** Boats and planes . . . 8 Intellectual property . . . Securities—Publicly traded . Χ 26 1,326,466 FMV 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests 12 Securities—Miscellaneous . . 13 Qualified conservation contribution—Historic structures Qualified conservation contribution—Other . . Real estate—Residential . Real estate—Commercial . Real estate—Other . . . 18 Collectibles 19 Food inventory . . . 20 Drugs and medical supplies . 21 Taxidermy 22 Historical artifacts . 23 Scientific specimens . . 24 Archeological artifacts . . 25 Other ▶ (_____ Other ▶ (______) 26 27 Other ▶ (______) Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt 30a Nο **b** If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 Yes 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Nο **b** If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, Schedule M (Form 990) (2019) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 51227J

Schedule M (Form 990) (2019)	Page 2					
	tion. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization					
is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.						
Return Reference	Explanation					
	Schedule M (Form 990) (2019)					

efile GRAPH	IIC print -	DO NOT PROCESS	As Filed Data -		DI	LN: 93493089014161
SCHEDUL (Form 990 or EZ)	990-	Complete to pro Form 990 o	al Information to Form 990 or 990-EZ ide information for responses to specific questions on 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ. www.irs.gov/Form990 for the latest information.			OMB No. 1545-0047 2019 Open to Public Inspection
Namel Betherofe ROCKY MOUNTAIN 990 Schedul	INSTITUTE	emental Informatio	n		74-2244146	entification number
Return Reference				Explanation		
FORM 990, PART VI, SECTION A, LINE 2	JULES KO SEPARAT		CREYTS HAVE A BU	SINESS RELATIONSHIP AS T	HEY SERVE T	OGETHER ON A

Return Explanation
Reference

FORM 990, THE BYLAWS HAVE BEEN REVISED TO INCLUDE THE FINANCE AND INVESTMENT COMMITTEES AS STANDING PART VI, COMMITTEES. THEIR CHAIRS ARE ALSO NOW A PART OF THE EXECUTIVE COMMITTEE. THE ARTICLES OF I SECTION A, NCORPORATION HAVE BEEN REVISED TO ALLOW EXTENDED TRUSTEES' TERMS OF SERVICE.

Return Explanation
Reference

FORM 990, RMI'S REVIEW PROCESS FOR THE 990 FORM BEGINS WITH A FORMAL REVIEW BY MANAGEMENT. AFTER MAN PART VI, AGEMENT REVIEW, THE 990 WILL BE DISTRIBUTED TO THE FULL BOARD PRIOR TO FILLING.

SECTION B, LINE 11B

Return Explanation
Reference

FORM 990, PART VI, SECTION B, LINE 12C

| FORM 990, PART VI, SECTION B, LINE 12C

Return

ı	Reference	
1	FORM 990,	RMI HAS ENGAGED AN OUTSIDE COMPENSATION FIRM TO REVIEW COMPENSATION AT ALL LEVELS AND HELP
ı	PART VI,	THE ORGANIZATION TO ENSURE COMPENSATION LEVELS ARE APPROPRIATELY COMPETITIVE WITHIN THE M
ı	SECTION B,	ARKET. THIS REVIEW IS COMPLETED EVERY COUPLE OF YEARS. THE LAST REVIEW WAS DONE IN 2019. R
ı	LINE 15	MI REGULARLY ENSURES NEW AND MODIFIED POSITIONS OF ALL LEVELS ARE APPROPRIATELY PRICED WIT
ı		H REGARD TO SALARY AND BONUS, INCLUDING SENIOR LEVEL POSITIONS. ADDITIONALLY, THE BOARD OF
ı		TRUSTEES FORMED A RENUMERATION COMMITTEE IN 2013 TO ENSURE APPROPRIATE COMPENSATION PRACT
ı		ICES ARE IN PLACE FOR THE ENTIRE INSTITUTE, INCLUSIVE OF THE EXECUTIVE LEVEL. THIS RENUMER
ı		ATION COMMITTEE ALSO APPROVES COMPENSATION ACTIONS REGARDING SENIOR TEAM MEMBERS AND RMI'S
ı		CEO.
ı		

Explanation

Return Explanation
Reference

FORM 990, RMI'S ARTICLES OF INCORPORATION ARE OF PUBLIC RECORD WITH THE COLORADO SECRETARY OF STATE.
ANNUAL REPORTS, IRS FORM 990, AND AUDITED FINANCIAL STATEMENTS ARE AVAILABLE ON THE RMI W
SECTION C,
LINE 19

Return Explanation Deference

Kelelelice	
,	CONSULTING FEES: PROGRAM SERVICE EXPENSES 9,887,781. MANAGEMENT AND GENERAL EXPENSES 295,1
PART IX,	01. FUNDRAISING EXPENSES 65,449. TOTAL EXPENSES 10,248,331.

LINE 11G

990 Schedule O, Supplemental Information

Return

Reference	·
FORM 990, PART XI,	CHANGE IN NET ASSETS HELD AT THE DENVER FOUNDATION -10,320. WRITE-OFF OF PLEDGES RECEIVABLE -322,269.
LINE 9:	

Explanation

efile GRAPHIC print - DO NOT PROCESS **SCHEDULE R** (Form 990)

Department of the Treasury

Internal Revenue Service

As Filed Data -

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

DLN: 93493089014161

Open to Public Inspection

Name of the organization ROCKY MOUNTAIN INSTITUTE				Employer ident	ification number		
ROCKT MODINIAIN INSTITUTE				74-2244146			
Part I Identification of Disregarded Entities. Complete if	the organization answe	red "Yes" on Form	990, Part IV, line 3	33.			
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (stat or foreign country)		(e) End-of-year assets	(f) Direct controlling entity		
(1) RMI INNOVATION CENTER LLC 2490 JUNCTION PLACE SUITE 200 BOULDER, CO 80302 74-2244146	OWNERSHIP & MGMT OF ROCKY MOUNTAIN INSTITUTE INNOVATION CENTER IN BASALT, CO	СО	0	14,303,718	ROCKY MOUNTAIN INSTITU	JTE	_
							_
							_
Part II Identification of Related Tax-Exempt Organization	ns. Complete if the organ	nization answered	"Yes" on Form 990	, Part IV, line 34 l	pecause it had one or	· more	_
related tax-exempt organizations during the tax year. (a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section (13) co ent	g) n 512(b ontrolled tity?
(1)ROCKY MOUNTAIN INSTITUTE-INTERNATIONAL 2490 JUNCTION PLACE SUITE 200 BOULDER, CO 80302	QIAHAI RMI RESEARCH CENTER	СО	501(C)(3)	LINE 12A, I	ROCKY MOUNTAIN INSTITUTE	Yes	No
47-3919461 (2)WATTTIME CORPORATION 1111 BROADWAY OAKLAND, CA 94607 47-1444637	RAISE AWARENESS ABOUT SHIFTING ELECTRICITY USE TIMES	CA	501(C)(3)	LINE 7	ROCKY MOUNTAIN INSTITUTE	Yes	
						+	
For Danerwork Peduction Act Notice, see the Instructions for Form 9	90	Cat No. 50135	57		Schedule P (Form	990) 3	010

(a)		(b)	(c)	(d)	(e)	(f)	(g)	(H	.)	(i)	l (i) l	(k	a)		
Name, address, and EIN of related organization		Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	Predominant income(related unrelated, excluded from tax under sections 512-514)	Share of total income		Dispropi allocat	rtionate tions?		Gene mana part	ral or iging ner?	Percer owner	ntage		
) QIANHAI RMI RESEARCH CENTER (SHENZHEN) (LIMITED PARTNERSHIP)		ENVIRONMENTAL	CH				RELATED	23,588		Yes	No No		Yes	No No	25.0	000 %
T 201 TOWER 1 NO 1 QIANWAN RO NHAI, SHENZHEN	TATALON IN /	PROTECTION			NEBATES	23,300			110		140		23.0			
Identification of Related Organizated because it had one or more related or	rtions Taxable as rganizations treate	a Corporation d as a corporatio	or Trust n or trus	t. Complete st during th	if the organ e tax year.	ization ans	swered "Ye	s" on	Form	990, Part I	V, lin	e 34				
because it had one or more related or (a) Name, address, and EIN of related organization	tions Taxable as rganizations treate (b) Primary activity	d as a corporatio	or Trust n or trus c) egal nicile or foreign ntry)	t during th	(d) controlling Typentity (C co	(e)	(f) Share of tota	Shar	(g) e of end year assets	d-of- Perc	V, lin (h) entage	.	(i Section (13) cor enti	ntrolle ity?		
because it had one or more related or (a) Name, address, and EIN of	rganizations treate	d as a corporatio	n or trus c) gal nicile or foreign	t during th	(d) controlling Typentity (C co	(e) e of entity orp, S corp,	(f) Share of tota	Shar	(g) e of end year	d-of- Perc	(h) entage	.	(13) cor	ntrolle		
because it had one or more related or (a) Name, address, and EIN of	rganizations treate	d as a corporatio	n or trus c) gal nicile or foreign	t during th	(d) controlling Typentity (C co	(e) e of entity orp, S corp,	(f) Share of tota	Shar	(g) e of end year	d-of- Perc	(h) entage	.	(13) cor enti	ntrolle ity?		
because it had one or more related or (a) Name, address, and EIN of	rganizations treate	d as a corporatio	n or trus c) gal nicile or foreign	t during th	(d) controlling Typentity (C co	(e) e of entity orp, S corp,	(f) Share of tota	Shar	(g) e of end year	d-of- Perc	(h) entage	.	(13) cor enti	ntrolle ity?		
because it had one or more related or (a) Name, address, and EIN of	rganizations treate	d as a corporatio	n or trus c) gal nicile or foreign	t during th	(d) controlling Typentity (C co	(e) e of entity orp, S corp,	(f) Share of tota	Shar	(g) e of end year	d-of- Perc	(h) entage	.	(13) cor enti	ntrolle ity?		
because it had one or more related or (a) Name, address, and EIN of	rganizations treate	d as a corporatio	n or trus c) gal nicile or foreign	t during th	(d) controlling Typentity (C co	(e) e of entity orp, S corp,	(f) Share of tota	Shar	(g) e of end year	d-of- Perc	(h) entage	.	(13) cor enti	ntrolle ity?		

Sched	ule R (Form 990) 2019		Pa	ge 3
Pa	Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1 D	ring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		No
b	Gift, grant, or capital contribution to related organization(s)	1 b		No
С	Gift, grant, or capital contribution from related organization(s)	1c	Yes	
	Loans or loan guarantees to or for related organization(s)	1d	Yes	
	Loans or loan guarantees by related organization(s)	1e		No
f	Dividends from related organization(s)	1 f		No
g	Sale of assets to related organization(s)	1 g		No
h	Purchase of assets from related organization(s)	1h		No
	Exchange of assets with related organization(s)	1i		No
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		No
	Performance of services or membership or fundraising solicitations for related organization(s)	11	Yes	
	Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
		4	V	-

f Dividends from related organization(s)	1f		No
g Sale of assets to related organization(s)	1 g		No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	1i		No
j Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)	11	Yes	
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	
o Sharing of paid employees with related organization(s)	10	Yes	
p Reimbursement paid to related organization(s) for expenses	1 p		No
q Reimbursement paid by related organization(s) for expenses	1 q	Yes	
r Other transfer of cash or property to related organization(s)	1r		No

h Purchase of asset	from related organization(s)				lh	- 1	No
	with related organization(s)				1i		No
j Lease of facilities,	equipment, or other assets to related organization(s)				1j		No
k Lease of facilities	equipment, or other assets from related organization(s)				1k		No
I Performance of se	vices or membership or fundraising solicitations for related organization(s)				11	Yes	
m Performance of se	vices or membership or fundraising solicitations by related organization(s)				1m		No
n Sharing of facilitie	, equipment, mailing lists, or other assets with related organization(s)				1n	Yes	
o Sharing of paid e	ployees with related organization(s)				10	Yes	
p Reimbursement p	id to related organization(s) for expenses				1 p		No
q Reimbursement բ	id by related organization(s) for expenses				1q	Yes	
r Other transfer of	ash or property to related organization(s)				1r		No
s Other transfer of	ash or property from related organization(s)				1s		No
2 If the answer to a	y of the above is "Yes," see the instructions for information on who must complete this	line, including covered	relationships and tra	ansaction thresholds.			
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining ar	mount inv	volved	
(1)ROCKY MOUNTAIN INST	UTE INTERNATIONAL	D	362,206	FMV			
(2)WATTTIME CORPORATION		С	100,000	FMV			

r Other transfer of cash or property to related organization(s)				1r	No
$oldsymbol{s}$ Other transfer of cash or property from related organization(s)				1s	No
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line	, including covered r	elationships and tra	nsaction thresholds.	•	
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d Method of determinin) ig amount involve	ed
(1)ROCKY MOUNTAIN INSTITUTE INTERNATIONAL	D	362,206	FMV		
(2)WATTTIME CORPORATION	С	100,000	FMV		

Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	or	(e) e all partners section 501(c)(3) ganizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)		partner?		(k) Percentage ownership
			317)	Yes	No			Yes	No		Yes	No	
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Part VII	Supplemental Information							
	Provide additional infor	mation for responses to questions on Schedule R. (see instructions).						
Retu	ırn Reference	Explanation						